PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM IF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY 08 FEB 27 PM 4: 21 COMPANY Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 20000 25799 700118951697 02/27/08--01039--007 **277.50 DOCUMENT # 1. Limited Liability Company's Name West Coast Homes, LLC CR2E041 (12/07) 2. Principal Office Address - No P.O. Box # 3. Mailing Office Address 4770 Biscayne Blvd 4. State/Country of Formation Florida Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Date Organized or Qualified **Suite 1400** To Do Business in Florida July 15,2003 City & State City & State 6. FEI Number Applied For Miami, FI 870710273 Not Applicable Zio Country Zip Country 7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required 33137 for a Certificate of Status 8. Name and Address of Current Registered Agent A \$100 reinstatement fee is imposed, except Melissa K. Rice in circumstances which the entity did not Street Address (P.O. Box Number is Not Acceptable) receive the prior notices. By checking this 4770 Biscayne Blvd box, you are certifying the prior notices were Suite, Apt. #, Etc. Suite 1400 not received and requesting the \$100 reinstatement be walved. City State Zip Code Miami 33137 9. I, being appointed the registered agent of the above named-limited liability company, am familiar with and accept the obligations of Chapter 608, F.S. Date 02/22/08 Registered Agent REGISTERED AGENT MUST SIGN 10. Names and Street Addresses of Managing Members/Managers Name of Managing Members/Managers Street Address of Each Managing Member/Manager Titles City / State / Zip 4770 Biscayne Blvd, Ste 1400 Miami, Fl. 33137 MGRM MKR Investments, Inc. 11. I certify that I am managing member/mapager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the timited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid, The information Indicated on this application is true end accurate, and my signature shall have the same legal effect as if made under oath. Date 02/22/08 __ Daytime Phone # 305-576-6889 anaging Member/Manager Melissa K. Rice, President MKR Investments, Inc.

Typed or printed name of signing Managing Member/Manager