

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000031916

FILED
Oct 20, 2004
Secretary of State

Entity Name: JOHN W. LEON, P.L.

Current Principal Place of Business:

P.O. BOX 348014
CORAL GABLES, FL 33234

New Principal Place of Business:

6175 NW 153 STREET
SUITE 403
MIAMI LAKES, FL 33014 US

Current Mailing Address:

P.O. BOX 348014
CORAL GABLES, FL 33234

New Mailing Address:

6175 NW 153 STREET
SUITE 403
MIAMI LAKES, FL 33014 US

FEI Number: 06-1706247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS RD. #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: LEON, JOHN W
Address: P.O. BOX 348014
City-St-Zip: CORAL GABLES, FL 33234

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEON, JOHN W
Address: 6175 NW 153 STREET, SUITE 403
City-St-Zip: MIAMI LAKES, FL 33014 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN LEON

MGR

10/20/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date