⁻ c		FLORIDA DEPARTMENT OF Katherine Harris Secretary of State DIVISION OF CORPORATION	STATE	
1. Limited I	JMENT # LO3 Liability Company's Name PS SECURITY GI	000033994 Rayp, LLC	N.Y	SECRETARY OF STATE
	11 Office Address 105w 131 57 1, etc.	3. Mailing Office Address 724056 1315 Suite, Apt. #, etc.	5. Date Org	anized or Qualified
City & State MI 19 Zip 3315	Country	City & State MIAMI FI Zip 33156 U	6. FEI Num 77-0 7.	USINESS IN Florida 09 09 2003 Iber Applied For 0608166 Not Applicable ITE OF STATUS DESIRED S500/Additional Fee required IDE OF STATUS DESIRED S500/Additional Fee required
	Street Address (P.O. Box Number is 724(Suite, Apt. #, Etc. City	SW 131 STRE	e 7	State Zip Code 33156
9. I, being Signature of Registered A	1	above named limited fability company, am fan 	illiar with and accept the oblig	pations of Chapter 608, F.S. Date $11/23/05^{$
10. Name Titles	es and Street Addresses of Managing N Name of Managing Members/Man	Street Ac	Idress of Each fember/Manager	City / State / Zip
Ngan	CARMEN VALOIN	1A 7240 SW	131 ST	MIAMI FI 33156
		REINSTATE	12/06	00061962856 /0501050007 **200.00
all fees	us reinstatement application the reason	for dissolution has been eliminated, the limited	t liahility comnany name satis	ided for in chapter 608, F.S. I further certify that when files the requirements of section 608,406, F.S., and that urate, and my signature shall have the same legal effect 215 5022

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