2005 LIMITED LIABILITY COMPANY REINSTATEMENT

ان 	REINSTA			FILED SECRETARY OF STATE
	T # L04000016	523 ,		SECRETARY OF STATE DIVISION OF CORPORATIONS
Entity Name		15		### I
- 1,		- Carlo		05 OCT -7 AH II: 22
incipal Place of Busine	ess	Mailing Address		
1728 CORAL WAY		1728 CORAL WAY		
IAMI, FL 33145		MIAMI, FL 33145		
Principal Place of Bus	siness	3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		10052005 REIN-LLC CR2E101 (6/04) 4. FEI Number Applied For
Zip	Country	Zip	Country	Not Applica
·				Fee Required
6. Nan	me and Address of Current I	Registered Agent	Name 1	7. Name and Address of New Registered Agent
ENGELS, MARTIN 100 SE STREET, #2150			Street_Add	ress (P.O. Box Number is Not Acceptable)
MAMI, FL 33131	7 2130		772	B coral way
			City	TAMI FL Zip Code NA
The above gamed entity submits this statement for the oursees of observing the sadie		014	registered agent, or both, in the State of Florida. I am familiar with, and acce	
the obligations of reg			egistered omice of re	gistored agont, or both, in the state of Forda. Familianing with, and acce
IGNATURE	ped or printed name of registered agent a	und tild it applicable (NOTE:	Registereri Agent signatur	e required when reinstating)
	ped or printed flame of registered agont a	no upp ii appiicabie. (1101c.	undertained where the second	
		1/		
	FEE IS \$150.00 006, Fee will be \$200.00	/		Make check payable to Florida Department of State
After January 1, 20	MANAGING MEMBE		10.	Make check payable to
After January 1, 20	006, Fee will be \$200.00		TITLE	Make check payable to Florida Department of State
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