PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING, THIS FORM.

-- -FILEÐ SECRETARY OF STATE LIMITED LIABILITY FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS COMPANY Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 08 MAR 26 PM 12: 13 **DOCUMENT # L04000029845** 1. Limited Liability Company's Name AFFINITI INVESTMENTS, LLC W08-134-21 CR2E041 (1/07) 2. Principal Office Address - No P.O. Box # 5501 CHATHAM WOODS CT 5501 CHATHAM WOODS CT Suite, Apt. #, etc. Suite, Apt. #, etc. Date Organized or Qualified To Do Business in Florida 04/19/2004 City & State City & State ORLANDO Applied For ... **ORLANDO** 20-1022351 Not Applicable Country ^{Zip} 32808 ^{Zip} 32808 Country USA 7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status 8. Name and Address of Current Registered Agent DARRYL B HENDERSON ✓ A \$100 reinstatement fee is imposed, except in circumstances which the entity did not 5561 CHATHAM WOOD'S COURT receive the prior notices. By checking this box, you are certifying the prior notices were Suite, Apt. #, Etc. not received and requesting the \$100 reinstatement be waived. ÖRLANDO 32808 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. Signature of 05/09/2007 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 TYRONE D SALTERS 5501 CHATHAM WOODS CT ORLANDO, FL 32808 -MGRM DARRYL B HENDERSON 5501 CHATHAM WOODS CT ORLANDO, FL 32808 MGRM 11. I certify that I am managing member/manager 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 Ilmited 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 and accurate, and my signature shall have the same legal effect as if made under oath.

Darrys B. Hewderson 3r. 3/24/08 Signature of Date 05/09/2007 Daytime Phone # 407 443-9339 Tyrone Satters DARRYL B HENDERSON Typed or printed name of signing Managing Member/Manager



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 13, 2008

AFFINITI INVESTMENTS, LLC 5501 CHATHAM WOODS COURT ORLANDO, FL 32808 US

SUBJECT: AFFINITI INVESTMENTS, LLC

Ref. Number: L04000029845

We have received your document for AFFINITI INVESTMENTS, LLC and your check(s) totaling \$655.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock Senior Section Administrator

Letter Number: 608A00015515