2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000059526

Entity Name: TAICHI-ARNIS.COM, LLC

FILED May 13, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1801 S TREASURE DR SUITE 317 N BAY VILLAGE, FL 33141 MIAMI BEACH, FL 33141 **Current Mailing Address: New Mailing Address:** P.O. BOX 414515 MIAMI BEACH, FL 33141 FEI Number: 76-0782483 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: Name and Address of New Registered Agent: MOLINARO, SHANE P MOLINARO, SHANE P 1801 SOUTH TREASURE DRIVE, #317 1145 71ST. MIAMI BEACH, FL 33141 US NORTH BAY VILLAGE, FL 33141 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: SHANE P. MOLINARO 05/13/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: MGRM (X) Change () Addition MGR () Delete MOLINARO, SHANE P MOLINARO, SHANE P Name: Name: P.O. BOX 414515 Address: P.O. B 414515 Address: City-St-Zip: MIAMI BEACH, FL 33154 City-St-Zip: MIAMI BEACH, FL 33141 Title: Title: () Change (X) Addition () Delete Name: Name: DAN, KALINOWSKI Address: Address: 1145 71ST. City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33141 Title: () Delete Title: () Change (X) Addition PALAU, ALEJANDRA Name: Name: Address: Address: P.O.B 414515 City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33141 Title: () Delete Title: () Change (X) Addition BELLI, DEBRA Name: Name: 12083 KIRKWOOD RD. Address: Address: City-St-Zip: City-St-Zip: HERALD, CA 95638 Title: () Delete Title: () Change (X) Addition OHLEMACHER, CAROL Name: Name: Address: Address: P.O.B 35 City-St-Zip: City-St-Zip: HEREFORD, AZ 85615 Title: () Delete Title: () Change (X) Addition BAILY, CHAD Name: Name: Address: Address: P.O.B. 414515 MIAMI BEACH, FL 33141 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SHANE P. MOLINARO MGRM 05/13/2006