
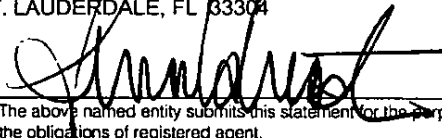


2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L04000066085 1. Entity Name TDH INVESTMENTS, LLC			
Principal Place of Business 1015 NE 26TH STREET WILTON MANORS, FL 33305 US		Mailing Address 1015 NE 26TH STREET WILTON MANORS, FL 33305 US	
2. Principal Place of Business 1500 NORTH FEDERAL HWY Suite, Apt. #, etc. # 200 City & State FT LAUDERDALE, FL Zip 33304 Country USA		3. Mailing Address 1500 NORTH FEDERAL HWY Suite, Apt. #, etc. # 200 City & State FT LAUDERDALE, FL Zip 33304 Country USA	
4. FEI Number 20-1602363		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		09222006 REIN-LLC CR2E101 (11/05)	
6. Name and Address of Current Registered Agent MASTRIANA, RONALD ESQ. 1500 NORTH FEDERAL HIGHWAY, SUITE 200 FT. LAUDERDALE, FL 33304 		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$200.00		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THOMAS D. HORMEL, TRUSTEE, U/T/D 8/20/1992 800 PASEO MIRAMAR PACIFIC PALISADES, CA 90272	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		Date 9/22/06 Daytime Phone # 954-566-1234	

FILED

06 SEP 25 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 2006

400080157414



CORPORATION SERVICE COMPANY

L0400000 66085

ACCOUNT NO. : 072100000032

REFERENCE : 477979 5490A

AUTHORIZATION :

COST LIMIT : \$ 150.00

ORDER DATE : September 25, 2006

ORDER TIME : 3:11 PM

ORDER NO. : 477979-005

CUSTOMER NO: 5490A

DOMESTIC FILINGS

NAME: TDH INVESTMENTS, LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - Ext# 2951

EXAMINER'S INITIALS _____

FILED
06 SEP 25 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2006 SEP 25 PM 4:16
TO ACKNOWLEDGE
SUFFICIENCY OF FILING