


2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 NOV 16 AM 9:49

DOCUMENT # L04000066232					
1. Entity Name STARLIGHT, LLC					
Principal Place of Business 160 W. S.R. 434 WINTER SPRINGS, FL 32708			Mailing Address 160 W. S.R. 434 WINTER SPRINGS, FL 32708		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-1601423	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CUTLER, RONALD 1172 PELICAN BAY DRIVE DAYTONA BEACH, FL 32119			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)</small>					
FILE NOW!!! FEE IS \$50.00 After January 1, 2007, Fee will be \$100.00		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ATSHAN, AHMAD 160 W. S.R. 434 WINTER SPRINGS, FL 32708		TITLE NAME STREET ADDRESS CITY-ST-ZIP	600081826716 11/16/06--01007--007 **50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ATSHAN, RABEHA 160 W. S.R. 434 WINTER SPRINGS, FL 32708		TITLE NAME STREET ADDRESS CITY-ST-ZIP	11/16/06--01007--007 **50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ATSHAN, RABEHA 160 W. S.R. 434 WINTER SPRINGS, FL 32708		TITLE NAME STREET ADDRESS CITY-ST-ZIP	11/16/06--01007--007 **50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ATSHAN, RABEHA 160 W. S.R. 434 WINTER SPRINGS, FL 32708		TITLE NAME STREET ADDRESS CITY-ST-ZIP	11/16/06--01007--007 **50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ATSHAN, RABEHA 160 W. S.R. 434 WINTER SPRINGS, FL 32708		TITLE NAME STREET ADDRESS CITY-ST-ZIP	11/16/06--01007--007 **50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ATSHAN, RABEHA 160 W. S.R. 434 WINTER SPRINGS, FL 32708		TITLE NAME STREET ADDRESS CITY-ST-ZIP	11/16/06--01007--007 **50.00	
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: _____ <i>Michael Cutler</i> - MGR MGR 10/09/2006 (407) 327-8270					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					