PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

С	ED LIABILITY OMPANY ISTATEMENT	Secreta	TMENT OF STATE by of State corporations	SECRETA : DIVISION THE 07 SEP -6 AM 10: 33
DOCUMENT # L04000083414 1. Limited Liability Company's Name WRESTLEREUNION, LLC				600109296486 09/11/0701019011 **150.00
2. Principal Office Address 19 FAYETTE DRIVE C/O GLANTZ & GLANTZ, P.A.				CR2E041 (8/05)
Suite, Apt. #	AYETTE DRIVE	Suite, Apt. #, etc.		FLORIDATUSA
City & State		7951 SW 6TH City & State		5. Date Organized or Qualified To Do Business in Florida 11/17/2004
	AN RIDGE, FL	PLANTATI	ON, FL	6. FEI Number ✓ Applied For Not Applicable
3343	5 USA	33324	ŬŜĂ	CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status
8. Name and Address of Current Registered Agent				
	RONALD P. GLANTZ, ESQ. C/O GLANTZ & GLANTZ, P.A. Street Address (P.D. Box Number is Not acceptable) Suite, Apt. #, Etc.			
	PLANTATION			State Zip Code FL 33324
Signature of Registered Agent REGISTERED DENT MUST SIGN REGISTERED DENT MUST SIGN Registered Agent Registered Agent Registered Reg				
10. Name	es and Street Addresses of Managing Men	bers/Managers		
Titles	Name of Managing Members/Manage	ers	Street Address of Each Managing Member/Mana	
MGRM	SAL A. CORRENTE	19 F	AYETTE DRIVE	OCEAN RIDGE, FL 33435
	REINSTATEMENT			
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 limited 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. Signature of Manager Day Manager Daytime Phone # (310) 466-0123				

Fax to: Farncisco Corrales

Law Firm of Glantz and Glantz:

Fax # 954-424-1206

Dear Francisco:

Per our phone conversation I was unaware that I had to reregister my LLC and I am not aware of any notification that I was supposed to have received. Please handle this for me and in the future have all notifications sent to your office for proper handling.

Sal Corrente

Managing Partner

WrestlePeunion LLC

March 17, 2006

Ronald P. Glantz

Also Admitted in DC & NY Bars

Wendy Newman Glantz Florida Board Certified Marital & Family Law



7951 Southwest Sixth Street Suite 200 Plantation, FL 33324 Tel: 954.424.1200

E-mail: glantz@glantzlaw.com Website: www.glantzlaw.com

August 10, 2007

Florida Department of State Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

RE:

LLC Reinstatement - Wrestlereunion, LLC

Document #L04000083414

Dear Sir/Madam:

Please find enclosed a Reinstatement Form for Wrestlereunion, LLC and a check in the amount of \$150.00 for the three (3) applicable \$50.00 Annual Report fees (2005, 2006 and 2007).

We also request that you waive the \$100.00 reinstatement fee and include a copy of our client's letter, stating that he did not receive notice of his annual report filing requirement. We are changing the mailing address to our office to prevent future non-filings.

If you have any questions or concerns, please do not hesitate to call me at (954) 424-1200, extension 327 or my colleague Gregory Nordt at extension 262.

Sincerely,

LAW OFFICES ØF GLANTZ & GLANYZ, P.A

By:

NCISCO A. CORRALES, ESQ.

FAC/khs Enclosures