SIGNATURE:

1 ai SIGNATURE AND TYPED OR PRINTED NAME OF SIG

Hage 192 2008 LIMITED LIABILITY COMPANY REINSTATEMENT **DOCUMENT # L05000014158** FILED 1. Entity Name DCC HOLDINGS, LLC 08 DEC 16 AM 10: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 14801 PALM BEACH BLVD. 14801 PALM BEACH BLVD. SUITE 100A SUITE 100A FORT MYERS, FL 33905 FORT MYERS, FL 33905 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 850 SW 14th 850 SW Suite, Apt. #, etc. Suite, Apt. #, etc. 12042008 REIN-LLC CR2E101 (1/07) City & State City & State 4. FEI Number Applied For 74-3139680 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 3060 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent EDWIN, SANTANA G Street Address (P.O. Box Number is Not Acceptable) 18416 MONET AVENUE PORT CHARLOTTE, FL 33948 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 (NOTE: Registered Agent signature required when reinstating) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Make check payable to FILE NOW!!! FEE IS \$138.75 Florida Department of State After January 1, 2009, Fee will be \$277.50 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. MGRM TITLE ☐ Change ☐ Addition TITLE NAME SANTANA, EDWIN G NAME 18416 MONET AVENUE STREET ADDRESS STREET ADDRESS PORT CHARLOTTE, FL 33948 CITY-ST-ZIP CITY-ST-ZIP MGRM ☐ Delete TITLE ☐ Change ☐ Addition DAVOODI, MAHMOOD NAME NAME STREET ADDRESS 1454 FAIRFAX PLACE STREET ADDRESS DAVIE, FL 333325 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET A CITY-ST-ZIP ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

IG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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DCC HOLDINGS, LLC

December 4, 2008

Florida Dept of State

To Whom It May Concern:

Enclosed is a reinstatement letter for Dòc #L05000014158. Last May payment was made and the annual report was sent, however, it was rejected and the LLC was made inactive since there was no signature on the form. A letter was sent to us, however, we did not receive the letter. My bookkeeper was informed by phone on 12/04/08 that this would be the only thing needed to reinstate DCC Holdings, LLC.

Thank you,

Mahmood Davoodi

President

DCC Holdings, LLC