

**2007 LIMITED LIABILITY COMPANY
REINSTATEMENT**

DOCUMENT # L05000034030

1. Entity Name
GIDDYAP, LLC



Principal Place of Business
C/O FISHER BROTHERS
299 PARK AVENUE
NEW YORK, NY 10171

Mailing Address
C/O FISHER BROTHERS
299 PARK AVENUE
NEW YORK, NY 10171

BK

2. Principal Place of Business - No P.O. Box #

3. Mailing Address
c/o Paul, Hastings

Suite, Apt. #, etc.

Suite, Apt. #, etc.

75 E. 55th Street

City & State

City & State

New York, NY

Zip

Zip

10022

Country

Country

U.S.A.

10092007 REIN-LLC CR2E101 (1/07)

Applied For
Not Applicable

5. Certificate of Status Desired \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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

Sarah K. Drake
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10/10/07

FILE NOW!! FEE IS \$150.00
After January 1, 2008, Fee will be \$200.00

Make check payable to
Florida Department of State

BK

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM
NAME FISHER, RICHARD L
STREET ADDRESS 299 PARK AVENUE
CITY-ST-ZIP NEW YORK, NY 10171

TITLE Sole Member
NAME Estate of Richard L. Fisher
STREET ADDRESS 299 Park Avenue
CITY-ST-ZIP New York, New York 10171

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

Change Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

REINSTATEMENT

2007

500110667975

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.

Escute of Richard L. Fisher by Martin L. Edelman, Executor

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

10/10/07 (212) 318-6000

Daytime Phone #



CORPORATION SERVICE COMPANY

L05000034030

RECEIVED

07 OCT 10 PM 4:09

ACCOUNT NO. : 0721000000
REFERENCE : 266867 4300123
AUTHORIZATION : *Syrells DeLoach*
COST LIMIT : \$ 150.00

ORDER DATE : October 10, 2007

ORDER TIME : 3:22 PM

BK

ORDER NO. : 266867-005

CUSTOMER NO: 4300123

DOMESTIC FILINGS

NAME: GIDDYAP, LLC

BK

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kathy Drake - Ext# 2959

EXAMINER'S INITIALS _____

07 OCT 10 AM 9:29
FILED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA