PLEASE READ ALL INSTRUCTIONS BEFORE CC

FILED May 16, 2006 8:00 am Secretary of State

		<u></u>	1 Secretary of State	
LIMITED LIABILITY COMPANY 2006	FLORIDA DEPAR Secretari Division of C	05-16-2006 90182 009 ***150.00		
20114545 11 2002001203311				
DOCUMENT # LOSO 100334 1. Limited Liability Company's Name				
Elliott Elite Educational SERVICES, 44C.			20045742	
2. Principal Office Address 3. Mailing Office Address			. CR2E041 (8/05)	
847 Orange ave.	847 Orange ave.		4. State/Country of Formation	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		Flonda 5. Date Organized or Qualified	
City & State	City & State		To Do Business in Florida 10165 6. FEI Number Applied For	
Doutton A Bch, FL Zip Country	Dayton	Country Country	20-3407715 Not Applicable	
32114 US	32114	ű's	7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status	
8. Name and Address of Current Registered Agent				
Name Robin E	Name Robin Elliott			
Street Address (P.O. Box Number is Not Acceptable) 847 Orange Ovenue				
Suita, Apt. #, Etc.				
CityState Zip Code				
Dayton & Beach FL 32114				
9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.				
Signature of Registered Agent Date 5/ i / Old				
REGISTERED AGENT MUST SIGN				
10. Names and Street Addresses of Managing Members/Managers Name of Street Address of Each Cart Street Address of Each				
Managing Members/Manag		Managing Member/Mana		
mar Kobin Elli	ott 13L	4 Michard	3214	
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 506, 406, 5.3 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.				
sign fiture of Managing Member/Manager Plus Elliott Date 5/1/06 Daytime Phone # (3876) 3/6-8672				
Managing Member/Manager Phone # Odd/510 8012				
Typed or printed name of signing Managing Member/Manager				