2007 LIMITED LIABILITY COMPANY REINSTATEMENT

1. Entity Nam	MENT # L05000117 E enterprises, LLC	7733		FILED O7 APR -3 PM 3: 22
Principal Place of Business Maiting Address 8504 BRIDEL COURT 8504 BRIDE ORLANDO, FL 32819 ORLANDO, F			St.	TALLAHASSEF. FLORIDA
Principal Place of Business - No P.O. Box # 3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04032007 REIN-LLC CR2E101 (1/07)
City & State		City & State		4, FE! Number Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired Specificate of Status Desired Fee Required
SUITE 130	PENDENT DRIVE	Registered Agent	Name 5 Street Adding	7. Name and Address of New Registered Agent Swald P.L. Swald P.L. Self-O. Bex Number of Not Acceptable) Dive Self-O. Bex Number of Not Acceptable) P.L. Self-O. Bex Number of Not Acceptable)
	o named entity submits this statement folions of registered agent. Sonature typed or printed name of registered agent	long Oswald	registered office or regis	stered agent, or both in the State of Florida. I am familiar with, and accept was Member April 3 2007
FiLE	NOW!!! FEE IS \$200.00			Make check payable to Florida Department of State
9.	MANAGING MEMBE		10.	ADDITIONS/CHANGES
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGRM EARLE, MARK 8504 BRIDEL COURT ORLANDO, FL 32819	□ Delicle	TITLE MAME STREET ADDRESS CHY-ST-ZIP	Change
MAME STREET ADDRESS CITY-ST-ZIP		☐ Deleto	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2006-2ª000/ Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		PEINS	STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZEP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
indicated limited lia	certify that the information supplied with on this report is true and accurate and billity company or the receiver or trusted.	this filing does not qualify for that my signature shall have a proowered to execute this	the exemptions contains the same legal effect as required by Ch. MAPK CAR. MANAGIN	ed in Chapter 119, Florida Statutes. I further certify that the information if made under oath; that I am a managing member or manager of the apter 608, Florida Statutes.

ACCOUNT NO. : 072100000032

REFERENCE: 834257

81528A

AUTHORIZATION :

COST LIMIT :

ORDER DATE: April 3, 2007

ORDER TIME : 3:06 PM

CORPORATION SERVICE COMPANY

ORDER NO. : 834257-005

CUSTOMER NO: 81528A

DOMESTIC FILINGS

NAME: RAILSIDE ENTERPRISES, LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext# 2956

EXAMINER'S INITIALS