

L93000000063

APPLICATION FOR REINSTATEMENT FOR LIMITED LIABILITY COMPANY



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

99 MAR -4 AM 10: 25

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company DOCUMENT # L93000000063 ALTON PROPERTIES, L.C.

1a. Principal Place of Business Address

2. Principal Place of Business 504 14th ST

2a. Mailing Address 1414 COLLINS AVE

3. Date Organized or Qualified 3/11/93

3a. State of Formation FL

City & State MIAMI BEACH, FL

City & State MIAMI BEACH, FL

4. FEI Number 65-0396042

Applied For Not Applicable

Zip 33139

Country DADE

Zip 33139

Country DADE

5. Date of Last Report 3/8/96

6. Certificate of Status Desired \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent Name PAUL CROWLEY Street Address (P.O. Box Number is Not Acceptable) 910 ALTON PROPERTIES INC Suite, Apt #, etc 504 14 ST City MIAMI BEACH FL Zip Code 33139

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 [Signature]

Date 2/5/99

10. Title Mgr

Managing Members/Managers PAUL CROWLEY

Business Street Address 2830 FAIRGREEN DR

City, State & Zip Code MIAMI BEACH, FL 33140

REINSTATEMENT 97-99 CM

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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 provided on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager [Signature]

Date 2/5/99

Daytime Phone # 305-534-2341

Typed or printed name of signing Managing Member/Manager PAUL CROWLEY