

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED

04 JAN 29 AM 9:53

SECRETARY OF STATE TALLAHASSEE FLORIDA

DOCUMENT # L95000000324

1. Limited Liability Company's Name 12550, L.C.

2. Principal Office Address 12550 Biscayne Blvd.

Suite, Apt. #, etc. #218 #500

City & State Miami, Florida

Zip 33181 Country USA

3. Mailing Office Address P.O. Box 300434

Suite, Apt. #, etc.

City & State Brooklyn, NY

Zip 11230 Country USA

4. State/Country of Formation Florida

5. Date Organized or Qualified To Do Business in Florida 4/28/1995

6. FEI Number 650577581

Applied For Not Applicable

7. CERTIFICATE OF STATUS DESIRED [X] \$5.00 Additional Fee required for a Certificate of Status

Name Eric A. Jacobs, Esq. 1911 Harrison street Hollywood, FL Registered Agent 200027892442 01/29/04--01053--007 **255 00

9. I, being appointed the registered agent, hereby accept the provisions of all state laws and I am familiar with and accept the obligations of Chapter 608, F.S. Signature of Registered Agent Date

10. Names and Street Address: (Signature of Registered Agent)

Table with 4 columns: Titles, Name of Managing Members/Managers, Street Address of Each Managing Member/Manager, City / State / Zip. Rows include Harry Vorhand, Milan Vorhand, and Thomas Vorhand.

REINSTATEMENT 02-04-03 dec

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. Signature of Managing Member/Manager Harry Vorhand Date 01/13/2004 Daytime Phone# 718-438-8701

CR2E041 (10/02)

MARC A. BEN-EZRA, P.A.
FULL SERVICE REAL ESTATE LAW

951 N.E. 167TH STREET, SUITE 204 NORTH MIAMI BEACH, FL 33182 P 305.770.4100 F 305.653.2929 FCLLAW.COM CLOSINGLAW.COM

January 23, 2004

Division of Corporations
Registration Section
409 E. Gaines Street
Tallahassee, FL 32399

Dear Sir or Madam:

Re: 12550, L.C.


Please find enclosed Reinstatement Form and Statement of Change of Registered Agent re the above.

Also enclosed is a check in the amount of \$255.00 in payment of Filing and Reinstatement Fees, as well as \$5.00 for a certified copy.

Please send the certified copy to the attention of the undersigned at Marc A. Ben-Ezra, P.A., 951 NE 167 Street, Suite 204, North Miami Beach, Florida.

If you have any questions, please call me directly at 305-770-4100, ext 239.

Very truly yours,



Ann Brugnaro
Legal Assistant