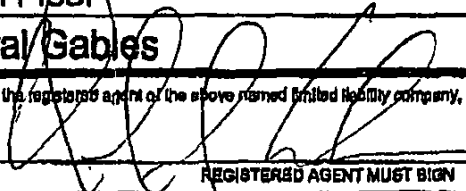
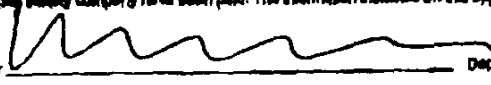


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| LIMITED LIABILITY COMPANY REINSTATEMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                  |  FLORIDA DEPARTMENT OF STATE<br>Secretary of State<br>DIVISION OF CORPORATIONS |                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| DOCUMENT #L96000000347                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  |                                                                                                                                                                 |                       |
| 1. Limited Liability Company's Name<br>Marshall Weinerman Enterprises, L.L.C.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                  |                                                                                                                                                                 |                       |
| 2. Principal Office Address<br>7496 Rexford Road                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                  | 3. Mailing Office Address<br>7496 Rexford Road                                                                                                                  |                       |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                  | Suite, Apt. #, etc.                                                                                                                                             |                       |
| City & State<br>Boca Raton FL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                  | City & State<br>Boca Raton FL                                                                                                                                   |                       |
| Zip<br>33434                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Country<br>Palm Beach            | Zip<br>33434                                                                                                                                                    | Country<br>Palm Beach |
| 4. State/Country of Formation<br>Florida / Palm Beach                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  | 5. Date Organized or Qualified To Do Business in Florida<br>03/25/1996                                                                                          |                       |
| 6. Filing Number<br>223608466                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                  | Applied For<br>Not Applicable                                                                                                                                   |                       |
| 7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                  |                                                                                                                                                                 |                       |
| 8. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                                                                                                                                                 |                       |
| Name<br>Richard J. Alan Cahan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                  |                                                                                                                                                                 |                       |
| Street Address (P.O. Box Number is Not Acceptable)<br>c/o Becker & Pollakoff P.A., 121 Alhambra Plaza                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  |                                                                                                                                                                 |                       |
| Suite, Apt. #, etc.<br>10th Floor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                  |                                                                                                                                                                 |                       |
| City<br>Coral Gables                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                  | State<br>FL                                                                                                                                                     | Zip Code<br>33134     |
| 9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 606, F.S.                                                                                                                                                                                                                                                                                                                                                                                                                            |                                  |                                                                                                                                                                 |                       |
| Signature of Registered Agent<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                  | Date<br>11/28/06                                                                                                                                                |                       |
| REGISTERED AGENT MUST SIGN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                                                                                                                                                 |                       |
| 10. Names and Street Addresses of Managing Members/Managers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                  |                                                                                                                                                                 |                       |
| Title                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Name of Managing Member/Managers | Street Address of Each Managing Member/Manager                                                                                                                  | City / State / Zip    |
| MGRM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Marshall Weinerman               | 7496 Rexford Road                                                                                                                                               | Boca Raton FL 33434   |
| MEM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Irene Weinerman                  | 7496 Rexford Road                                                                                                                                               | Boca Raton FL 33434   |
| MEM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Samuel Gurfinkel                 | 7496 Rexford Road                                                                                                                                               | Boca Raton FL 33434   |
| MEM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Rose Gurfinkel                   | 7496 Rexford Road                                                                                                                                               | Boca Raton FL 33434   |
| REINSTATEMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                  | 2001-2006                                                                                                                                                       |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  | 200082122412                                                                                                                                                    |                       |
| 11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 606, 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 606.406, F.S., 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 as if made under oath. |                                  |                                                                                                                                                                 |                       |
| Signature of Managing Member/Manager<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                  | Date<br>11/28/06                                                                                                                                                |                       |
| Typed or printed name of managing Managing Member/Manager<br>Marshall Weinerman                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  | Daytime Phone #<br>561-487-8412                                                                                                                                 |                       |



CORPORATION SERVICE COMPANY

# L96000000347

ACCOUNT NO. : 072100000032

REFERENCE : 625554 5014227

AUTHORIZATION :

COST LIMIT : \$ 405.00

ORDER DATE : November 28, 2006

ORDER TIME : 2:57 PM

ORDER NO. : 625554-005

CUSTOMER NO: 5014227

DOMESTIC FILINGS

NAME: MARSHALL WEINERMAN  
ENTERPRISES, L.L.C.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - Ext# 2951

EXAMINER'S INITIALS

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2006 NOV 28 PM 4:17  
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TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

FILED  
06 NOV 28 AM 9:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA