PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 200 LIMITED LIABILITY FLORIDA DEPARTMENT, OF STATE Katherine Harris COMPANY Secretary of State FILED REINSTATEMENT DIVISION OF CORPORATIONS 01 OCT 29 PH 12: 17 **DOCUMENT#** SECRETARY OF STATE 1. Limited Liability Company's Name TALLAHASSEE, FLORIDA Brookstone Development LC 6105 Transit Road, Suite 140 East Amherst, NY 14051 2. Principal Office Address 3. Mailing Office Address 4. State/Country of Formation Suite, Apt. #, etc. Suite, Apt. #, etc. Florida 5. Date Organized or Qualified To Do Business in Florida 7 1 0 / 15 / 1997 City & State City & State Applied For 6. FEI Number -16-1545381 Not Applicable Zip Country Country \$500 Additional Resoccutived for a Cardifficate of Status CERTIFICATE OF STATUS DESIRED 8. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY 300004655733 -C -11/06/01--01003--027 ******50.00 ******50.00 Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street Suite, Apt. #, Etc. Zip Code 32301 Tallahassee (9/01) 9. I, being appointed the registered agent of the above CR2E041 10-26-01 BRIAN COURTNEY, ASST. V.P. Date_ Registrated Agent 10. Names and St t Addresses of Mana ging Members/Managers Street Address of Each Managing Member/Manager Name of Managing Members/Managers Titles City / State / Zip 6278 Gott Creek Trail East Amherst, NY David A. Huck Mgr 11. I cer by 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 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/Manage Date __10/22/01 Daytime Phone # 716-639-0396

Typed or printed name of signing Managing Member/Manager