REINSTATEMENT 2001, 2002

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

L97000001288

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
2002 SEP 30 PM 12:15
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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DOCUMENT # L97000001288

1. Limited Liability Company's Name
Aqaquelypse Development Group, L.C.

2. Principal Office Address	**3.** Mailing Office Address
4465 Cool Emerald Dr.	4465 Cool Emerald Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tallahassee, FL	City & State: Tallahassee, FL
Zip: 32303 Country: USA	Zip: 32303 Country: USA

4. State/Country of Formation: FL / USA

5. Date Organized or Qualified To Do Business in Florida: 11/18/97

6. FEI Number: 593480912 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Charles E. Frazier Jr.

Street Address (P.O. Box Number is Not Acceptable): 4465 Cool Emerald Dr.

Suite, Apt. #, Etc.:

City: Tallahassee State: FL Zip Code: 32303

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: Charles E. Frazier Jr. Date:

REGISTERED AGENT MUST SIGN

CR2E041 (9/01)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Charles E. Frazier Jr	4465 Cool Emerald Dr	Tallahassee, FL 32303
MGR	Oscar Joyner	635 Mission Circle	Irving, TX 75063

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 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: Charles E. Frazier Jr. Date: 9-27-02 Daytime Phone #: 850-562-1100

Typed or printed name of signing Managing Member/Manager: Charles Frazier, Jr