PLEASEREAD ALE INSTAUCTIONS BEFORE OF INTERMEDIAN THE COMPANY COMPANY REINSTATEMENT DOCUMENT # L97000001434 Limited Liability Company's Name PLEASEREAD ALE INSTAUCTIONS LICENSE OF INTERMEDIAN COMPANY Secretary of State DIVISION OF CORPORATIONS 03 0CT -3 PM 5: 04

REIN	STATEMENT	DIVI	03	OCT -3 PM 5: 04			
1. Limited	JMENT # L97 Liability Company's Name cous Systems L.C	•) 157	2023674 03-01070-020	:92 **150.00		
· · · · · · · · · · · · · · · · · · ·			ffice Address rickell Ave	4. State/Country of	of Formation		
Suite, Apt. #	f, etc.	Suite, Apt. #,	Suite, Apt. #, etc. 4K		FL 5. Date Organized or Qualified To Do Business in Florida 12/19/1997		
City & State Miami, FL		City & State Miami,	City & State Miami, FL		FEI Number 650814544 Applied For Not Applicable		
^{Zip} 33129	Country USA	^{Zip} 33129	Country	7. CERTIFICATE OF	STATUS DESIRED 55.00 Ac	dditional Fee required Certificate of Status	
9 . I being	Suite, Apt. #, Etc. 4K City Miami, FL		2451 Brickell Ave	F	State Zip Code 33129		
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 REGISTERED AGENT MUST SIGN							
10. Name	s and Street Addresses of M	anaging Members/Managers				r	
Titles	Nam Managing Mem		Street Address of Managing Member		City / State / Z	ip ,	
MGRM	Michael Fussy	· · · · · · · · · · · · · · · · · · ·	3325 KIRKMAN RD. #	434 O	orlando, FL 32811		
in regard one.	P.	INSTATE	MENT_2-0	03			

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 empany 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	o f
Managing	Member/Manager

Abd	- K	h-
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10/02/2003

Daytime Phone # 954-325-3480

Typed or printed name of signing Managing Member/Manager _

CR2E041 (10/02)