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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT  
 FLORIDA DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS

FILED  
 SECRETARY OF STATE  
 52

1. DOCUMENT # L98000000844

Name and Mailing Address

0012317 01 AT 0.292 \*\*AUTO T5 0 0615 33435-332601  
 RATNER ENTITIES, L.C.  
 6711 NORTH OCEAN BLVD., BLDG 1  
 OCEAN RIDGE FL 33435-3326

FILED  
 Feb 17, 2004 8:00 A.M.  
 Secretary of State

REINSTATEMENT 2003-2004

2. New Mailing Address City, State, Zip		4. State/Country of Formation FL	
Principal Place of Business 6711 NORTH OCEAN BLVD., BLDG 1 OCEAN RIDGE FL 33435		5. Date Organized or Qualified To Do Business in Florida 06/22/1998	
3. New Principal Place of Business Address City, State, Zip		6. FEI Number NOT APPLICABLE	
		7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	
8. Name and Address of Current Registered Agent RATNER, JEFFREY S 6711 NORTH OCEAN BLVD., BLDG 1 OCEAN RIDGE FL 33435		9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 300025692233 12/22/03--01089--008 **\$150.00 City FL Zip Code	
10. 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 <i>[Signature]</i> Date _____ REGISTERED AGENT MUST SIGN			
11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	RATNER, JEFFREY S	6711 NORTH OCEAN BLVD., BLDGS 1 & 2	OCEAN RIDGE FL 33435
			300025692233 02/20/04--01020--013 **\$5.00
			2003 - 2004
	REINSTATEMENT		300025692233 02/20/04--01020--014 **\$50.00
12. 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 <i>[Signature]</i> Date 12/18/03 Daytime Phone # 561-736-4600 Typed or printed name of signing Managing Member/Manager Jeffrey S. Ratner			

CR2E084 (7/03)