

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

2003 DEC 15 PM 1:55

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

1. DOCUMENT # L98000001836

Name and Mailing Address

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OTT INVESTMENTS, LLC
4501 MANATTEE AVE W
#104
BRADENTON FL 34209-3952



CR2E084 (7/03)

2. New Mailing Address <i>2006 14th Ave W.</i>		4. State/Country of Formation FL	
City, State, Zip <i>BRADENTON, FL 34205</i>		5. Date Organized or Qualified To Do Business in Florida 09/14/1998	
Principal Place of Business 810 10TH AVE W PALMETTO FL	3. New Principal Place of Business Address City, State, Zip	6. FEI Number 65-0862878	Applied For Not Applicable
8. Name and Address of Current Registered Agent DION, RICHARD L 2006 14TH AVE W BRADENTON FL 34205		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

9. Name and Address of New Registered Agent Name <i>TAMMY B DION</i> Street Address (P.O. Box Number is Not Acceptable) <i>2006 14th AVE W</i> <i>BRADENTON, FL</i> City FL Zip Code <i>34205</i>	
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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 *Tammy B. Dion* Date *11/20/03*
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	DION, RICHARD L	2006 14TH AVE WEST	BRADENTON FL 34205
MGRM	DION, STEPHEN M	25 WATER ST 138 FIAT AVE,	E GREENWICH RI 02818 CRAWSTON, RI 02910
MGRM	DION, TAMMY B	<i>2006 14th AVE W</i>	<i>BRADENTON, FL</i> <i>34205</i>

REINSTATEMENT 2003

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 *Tammy B. Dion* Date *11/20/03* Daytime Phone # *941-962-5054*
REGISTERED AGENT MUST SIGN