

L99000001631

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

03 DEC 11 PM 1:36

W12/18

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L99000001631

1. Limited Liability Company's Name
VALHALLA CAPITAL ADVISORS, LLC

REINSTATEMENT 2001-2003

2. Principal Office Address 1160 NW 159 dr		3. Mailing Office Address 1160 NW 159 dr	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State miami, fl		City & State miami, fl	
Zip 33169	Country usa	Zip 33169	Country usa

4. State/Country of Formation FL	
5. Date Organized or Qualified To Do Business in Florida 3/17/1999	
6. FEI Number 650906464	Applied For 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		
Name James Dickey		
Street Address (P.O. Box Number is Not Acceptable) 1160 NW 159th Dr		
Suite, Apt. #, Etc.		
City miami	State FL	Zip Code 33169

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 _____ Date 12/7/03

REGISTERED AGENT MUST SIGN

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	Ric Chaimowicz	1160 NW 159th Dr	Miami, FL 33169
		2001-2003	
	REINSTATEMENT		

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 _____ Date 12/08/03 Daytime Phone# 305-577-9700

Typed or printed name of signing Managing Member/Manager RIC CHAIMOWICZ

CR20041 (10/02)