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05/09/2003 4:53 PM TX 005
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MAY-09-03 FRI 09:08 FAX NO. 817 1/30
MAY-09-03(FRI) 09:25 EARLWEBER&ASSO
05/09/03 THU 16:42 FAX 650 784 8857

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APPROVED AND FILED
002 002
03 MAY -9 AM 8p. 602
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

**FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # 199000002756

1. Limited Liability Company's Name
INLET BEACH-ONE, L.C.

2. Principal office Address
NO. 12, SANDESTIN ESTATES
Suite, Apt. R, etc.

3. Mailing Office Address
NO. 12, SANDESTIN ESTATES
Suite, Apt. R, etc.

City & State
DESTIN

Zip
32540

County
OKALOOSA

City & State
DESTIN

Zip
32540

County
OKALOOSA

REINSTATEMENT

2002-
2003

By Name and Address of Current Registered Agent

Name
STEPHEN R. MOOREHEAD

Street Address (P.O. Box Number if Not Applicable)
4300 BAYOU BOULEVARD

Suite, Apt. R, etc.
SUITE 13

City
PENSACOLA

State
FL

Zip Code
32503

3. I, being appointed the registered agent of the above named limited liability company, heretofore with and accept the obligations of Chapter 605, F.S.

Signature of Registered Agent
[Signature] DATE **5-9-03**

REGISTERED AGENT MUST SIGN

4. Name and Street Address of Managing Member/Manager

Name	Street Address of Each Member/Manager	City / State / Zip
MEM EARL E. WEBER, JR.	38 CHATEAU TRIANON	KENNER, LA 70055
MEM WRC DEVELOPMENT, INC.	106 BENNING DRIVE, SUITE 87	DESTIN, FL 32541

5. I certify that I am managing member/manager of the registered or limited liability company, and that the information provided for in chapters 605, F.S., and 607, F.S., and that all have been by the limited liability company/manager. The information provided 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
[Signature] DATE **5-9-03** Daytime Phone # **504-461-5522**

Typed or printed name of signing Managing Member/Manager
EARL WEBER, JR.

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05/09/03 FRI 09:08 [TX/RX NO 7835]

05/09/2003 FRI 11:18 [TX/RX NO 9145] 002

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : BURKE AND BLUE, P.A.
Account Number : 072100000111
Phone : (850) 769-1414
Fax Number : (850) 784-0857

LIMITED LIABILITY REINSTATEMENT

INLET BEACH-ONE, L.C.

Certificate of Status	0
Certified Copy	0
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