## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

		FLUA	SE READ /	ALL INS	INUCI	IONS BEFC	IKE C	OWIPLETT	NG II	HIS FORIV	1.		
LIMITED LIABILITY COMPANY REINSTATEMENT					FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS				SECRETARY OF STATE DIVISION OF CORPORATIONS  00 OCT 18 PM11: 02				
DOCUMENT # L9900004063										00001	10 (1111	. 02	
PDC Properties, LLC ""								-nl					
PDC Properties, LLC 410 43rd street West - Suite I" Bradenton, FL 34209-2901											$\Lambda$		
2. Principal	I Office Addr	ess		3. Mailing Office Address									
Suite, Apt. #, etc.				Same Suite, Apt. #, etc.				4. State/Country of Formation FU / USA					
N/A				N/A City & State				5. Date Organized or Qualified To Do Business in Florida 7 - 7 - 99					
Same				Same				6. FEI Number Applied For Not Applicable					
zip Sal	me	Country	LSA	sai	ne	Country		7. CERTIFICATE	OF STATU	S DESIRED X	300 Additional fore Centilies	ින ලොබ්වේ මෙන්වන්න	
	8. Name and Address of Current Registered Agent											<b></b>	
Name MARC H. FELOMAN													
	Street Address (P.O. Box Number is Not Acceptable)  3908 21044 ST W.								-10	J3 <b>4</b> 38 1/25/000	010150		
+\	Suite, Apt. #, Etc.								***	**155.00 	****100	¥₩ 	
	City	BI	RADENT	CON		$\bigcap$			State <b>FL</b>	Zip Code 34205	5		
9. I, being a Signature of Registered A		registere	agent of the above	e ramed mite	$\leq$	mpany, am familiar v SIGN	with and a	ccept the obligati		apter 608, F.S.	3.20	CR2E041 (9/00)	
10. Names	s and Street	Addresses	of Managing Mem	bers/Managers	1								
Titles	Name of Managing Members/Managers			rs	Street Address of Each Managing Member/Manag					City / St	ate / Zip		
MGR	DARUA COOK				GRADENTON, FL								
	4		· · · · · · · · · · · · · · · · · · ·								· 		
iling តេរ all fees (	that I am mais reinstatem owed by the ade under oa	ent applica limited liat	ember/manager or tian/the reason for company have	dissolution has been paid. The	been elimina information	oowered to execute lated, the limited liabil indicated on this app	tity compa plication is	ny name satisties s true and accurat	for in cha the requir e, and my	ements of section signature shape	1608.406, F.S., 176 th s3ne 21	and that	
Signature of Managing Me			WULU	UM	/ m	ENERAL IANAGER Date F COOK	<u> 1913</u>	3/00 Da	sytime Pho	PAT COC	A PASTRUCT	IÓN, INC.	
Typed or prin	nted name of	signing M	anaging Member/N	<sub>fanager</sub> D	ARH	+ COOK							