


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS												
FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 01 DEC 21 PM 3:06														
DOCUMENT # L99000005980														
1. Limited Liability Company's Name Sunset Hospitality Management, LLC														
2. Principal Office Address 5555 College Rd. Suite, Apt. #, etc. City & State Key West, FL Zip Country 33040 USA	3. Mailing Office Address 5555 College Rd. Suite, Apt. #, etc. City & State Key West, FL Zip Country 33040 USA	4. State/Country of Formation Florida, USA 5. Date Organized or Qualified To Do Business in Florida 9/23/99 6. FEI Number 65-0948745 Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> 7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status												
8. Name and Address of Current Registered Agent Name: Douglas J. Bell Street Address (P.O. Box Number is Not Acceptable): 5555 College Rd. Suite, Apt. #, Etc.: City: Key West State: FL Zip Code: 33040														
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: <i>[Signature]</i> Date: 12/20/01 REGISTERED AGENT MUST SIGN														
10. Names and Street Addresses of Managing Members/Managers <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Titles</th> <th style="width: 35%;">Name of Managing Members/Managers</th> <th style="width: 30%;">Street Address of Each Managing Member/Manager</th> <th style="width: 20%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>Mgr</td> <td>Douglas J. Bell</td> <td>5555 College Rd.</td> <td>Key West, FL 33040</td> </tr> <tr> <td colspan="4" style="height: 100px; vertical-align: bottom;"> <div style="display: flex; justify-content: space-between;"> <div> REINSTATEMENT 2001 </div> <div> Reim 100. UBR 50 150.00 NK </div> </div> </td> </tr> </tbody> </table>			Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	Mgr	Douglas J. Bell	5555 College Rd.	Key West, FL 33040	<div style="display: flex; justify-content: space-between;"> <div> REINSTATEMENT 2001 </div> <div> Reim 100. UBR 50 150.00 NK </div> </div>			
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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: <i>[Signature]</i> Date: 12/20/01 Daytime Phone #: 305-296-7101 Typed or printed name of signing Managing Member/Manager:														

CR2E041 (9/01)