FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L99000006136

1. Limited Liability Company's Name
WPV RESTAURANT, LLC

9/28/01

2. Principal Office Address
1918 Rowena Avenue

Suite, Apt. #, etc.

City & State
Orlando, FL

Zip 32803   Country USA

3. Mailing Office Address
1918 Rowena Avenue

Suite, Apt. #, etc.

City & State
Orlando, FL

Zip 32803   Country USA

4. State/Country of Formation
Florida

5. Date Organized or Qualified To Do Business in Florida   09/28/1999

6. FEI Number
59 3601117

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name   Eric F. Kovar

Street Address (P.O. Box Number is Not Acceptable)   1918 Rowena Avenue

Suite, Apt. #, Etc.

City   Orlando

State   FL   Zip Code   32803

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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 _____
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
MGRM	WPV BARCO, INC.	1918 Rowena Avenue	Orlando, FL 32803

REINSTATEMENT 2001-2003

11. I certify that I am managing member/manager of 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 12/24/03   Daytime Phone # 407-694-5638

Typed or printed name of signing Managing Member/Manager _____

CR2E041 (10/02)