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			TIONS BEFORE			
			RTMENT OF STATE	02	DEC -5 AN 11: 10	
c	COMPANY					
REINSTATEMENT			CORPORATIONS	TÁL	CRETARY OF STATE Lahassee, florida	
		2050		-		
DOCUMENT # L99000006658 1. Limited Liability Company's Name						
	n Diversified LLC				、	
2. Principa	al Office Address	3. Mailing Office Add	g Office Address			
201 Soi	uth Biscayne Boulevard	201 South Biscayne Boulevard		4. State/Coun	try of Formation	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Florida, U.S.A.	
Suite 1700		Suite 1700			nized or Qualified iness in Florida October 13, 199	9
City & State Miami, Florida		City & State Miami, Florida		6. FEI Numbe	er A	pplied For
Zip	Country	Zip	Country		54885	lot Applicable
33131	U.S.Á.	33131	U.S.A.	7. CERTIFICATE	OF STATUS DESIRED STATUS DESIRED For a Certific	al Fee required ate of Status
8. Name and Address of Current Registered Agent						
Name Miami Center Registered Agents, Inc.						
	Street Address (P.O. Box Number is Not Acceptable) 201 South Biscayne Boulevard Suite, Apt. #, Etc.					
					100009370511 12/05/0201026006 **150 00	
	Suite 1700					
	^{City} Miami,				State Zip Code FL 33131	
9. Lbeing	appointed the registered agent of the abo	ve named limited lighility	company, am familiar with and	accept the obligati		ŝ
Signature o		Λ	company, am laminar with anti-	accept the obligati	•	CR2E041 (9/01
Signature of Registered Agent AGENT AGENT MUST SIGN					Date	CR2E
- 10. Name						
IO. Names and Street Addresses of Managing Members/Managers Titles Name of Street Address of Each					City / State / Zie	
	Managing Members/Managers		Managing Member/Manager		City / State / Zip	
MGR	Carol Iacovelli 201 South Biscayne Blvd			Suite 1700	Miami, Florida 33131	
-						
	·,·		·····		····	· · · · ·
					····	
11. I certify	y that I am managing member/manager or his reinstatement application the reason for	the receiver or trustee e	mpowered to execute this applicated the limited liability come	ication as provided	d for in chapter 608, F.S. I further certify t	hat when
all fees	s owed by the limited liability company have nade under oath.	been paid. The informati	on indicated on this application	is true and accurat	te, and my signature shall have the same	legal effect
Signature of		Nor/all -	· 11/2	26/02	(305) 628-2886	
Managing N	Nember/Manager	Carol laco	Date	D	aytime Phone#628-2886	<u> </u>
Typed or pri	inted name of signing Managing Member/	Manager	, , , , , , , , , , , , , , , , , , ,	·		

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ALL

KLUGER, PERETZ, KAPLAN & BERLIN PA.

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Reply to: Ron J. Halperin (305) 379-9000 <u>rhalperin@kpkb.com</u>

December 2, 2002

VIA FEDERAL EXPRESS

Department of State Uniform Business Reports Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Re: Falcon Diversified, LLC

To Whom It May Concern:

Enclosed is a completed Reinstatement Application for Falcon Diversified, LLC, (the "**Company**"), along with a check in the amount of \$150.00, representing the filing fees for years 2000, 2001 and 2002. We respectfully request that this amount be accepted to reinstate the Company for the reason set forth below.

Please note that the Company never received the 2000, 2001 and 2002 Reports (or the resulting notice of administrative dissolution) due to the Secretary of State's records *incorrectly* listing "201 South Biscayne Boulevard, Miami, Florida 33131" as the Company's mailing address. The Company's Articles of Organization clearly set forth the mailing address to be "c/o Abbey L. Kaplan, Esq., Kluger, Peretz, Kaplan & Berlin, P.A., 201 South Biscayne Boulevard, Miami, Florida 33131."

Please contact me at 305-379-9000 should you require any additional information.

Respectfully submitted,

on J. Halper

ŘJH/esm Enclosures

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