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1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

2. The second step is to gather relevant information and data. This can involve research, consultation with experts, or collecting data from various sources.

3. The third step is to analyze the information and data collected. This involves identifying patterns, trends, and relationships that can help in understanding the problem.

4. The fourth step is to develop a solution or answer. This involves applying the knowledge and skills gained from the previous steps to create a response that addresses the problem.

5. The fifth step is to evaluate the solution or answer. This involves checking the results against the original problem and requirements to ensure that the solution is effective and accurate.

6. The sixth step is to communicate the solution or answer. This involves presenting the findings in a clear and concise manner that is easy for others to understand.

7. The seventh step is to reflect on the process. This involves thinking about what was learned from the experience and how it can be applied to future problems.

8. The eighth step is to seek feedback. This involves asking others for their thoughts and suggestions on the solution and the process used to develop it.

9. The ninth step is to implement the solution. This involves putting the solution into practice and monitoring its effectiveness over time.

10. The tenth step is to review the results. This involves evaluating the outcomes of the implementation and making any necessary adjustments to improve the solution.

2. New Mailing Address City, State, Zip		4. State/Country of Formation <div style="text-align: center;">DE</div>													
Principal Place of Business 4500 EXECUTIVE DR., STE. 110 NAPLES FL 34119		5. Date Organized or Qualified To Do Business in Florida <div style="text-align: right;">04/20/2000</div>													
3. New Principal Place of Business Address City, State, Zip		6. FEI Number <div style="text-align: center;">13-4112707</div>													
8. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status 9. Name and Address of New Registered Agent Name THOMAS G BROWN Street Address (P.O. Box Number is Not Acceptable) N. Media Group 4500 Executive Dr. Suite 110 City NAPLES FL Zip Code 34119													
10. 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 <u>Thomas G. Brown</u> Date _____ <div style="text-align: center;">REGISTERED AGENT MUST SIGN</div>															
11. Names and Street Addresses of Each Managing Member/Manager <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Title(s)</th> <th style="width: 30%;">Name of Managing Members/Managers</th> <th style="width: 30%;">Street Address of Each Managing Member/Manager</th> <th style="width: 30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>MGRM</td> <td>BROWN, THOMAS G</td> <td>4500 EXECUTIVE DR., STE. 110</td> <td>NAPLES FL 34119</td> </tr> <tr> <td colspan="4" style="text-align: center;"> REINSTATEMENT 03 <div style="text-align: right;">dec</div> </td> </tr> </tbody> </table>				Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	MGRM	BROWN, THOMAS G	4500 EXECUTIVE DR., STE. 110	NAPLES FL 34119	REINSTATEMENT 03 <div style="text-align: right;">dec</div>			
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12. 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 <u>Thomas G. Brown</u> Date 10/20/03 Daytime Phone # 239-544-0100 Typed or printed name of signing Managing Member/Manager _____															