


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

01 NOV 13 PM 12:17
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT #

M-1050

1. Limited Liability Company's Name

Sport Horse International LLC

REINSTATEMENT 2001

2. Principal Office Address

2600 E Commercial
 Suite, Apt. #, etc.
 200

City & State
 Ft Lauderdale FL

Zip
 33308

Country
 Broward

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. State/Country of Formation

Nevada

5. Date Organized or Qualified To Do Business in Florida

6/15/01

6. FEI Number

65-1128299

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED

\$300 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Sheldon Liebowitz

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

2600 E Commercial Blvd

Suite, Apt. #, Etc.

200

City

Ft Lauderdale

State

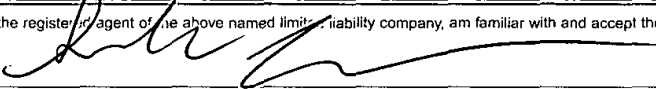
FL

Zip Code

33308

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

10/26/01

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
MGR	Sheldon Liebowitz	2600 E Commercial Blvd Suite 200	Ft Laud FL 33308

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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



Date

1/26/01

Daytime Phone #

(954) 491-4511

Typed or printed name of signing Managing Member/Manager

CR2E041 (9/01)