PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF STATE Jim Smith

> Secretary of State DIVISION OF CORPORATIONS

ATE FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

4. State/Country of Formation

M 11/5

1. DOCUMENT # M0000001222

Name and Mailing Address

2. New Mailing Address

0007041 01 FP 0.352 **PRSRT T2 0 0615 19120-460000 ladlidaadiabilkaaiddallalladiadialialiali SIMKAR LLC 700 RAMONA AVENUE PHILADELPHIA PA 19120-4600

500008780385 11/04/02--01058--001 ***50.00



City Stota Tin					PA			
City, State, Zip————————————————————————————————————				To Do Business in Florida 06/21/2000				
Principal Place of Business 700 RAMONA AVENUE PHILADELPHIA PA 19120-4691		3. New Principal Place of Business Address		6. FEI Number			Applied For	
		City. State, Zip		7. CERTIFICATE OF STATUS DESIRED 55.00 Additional Fee require for a Certificate of Status				
8. Name and Address of Current Registered Agent				9. Name and A	9. Name and Address of New Registered Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			Name Street Address (P.O. Box Number is Not Acceptable)					
			City	<u> </u>	FL Zip Code		p Code	
Signature of Registered	Agent / Muly Music.	GISTERED GENT MUST SIGN SI Member/Manager	SARET E. I	ROUTZAHN Secretary	Date 10/29/0	2	And the second s	
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Mana			r City / State / Zip			
MGR	EAGLE, WILLIAM J	700 RAMONA AV	700 RAMONA AVENUE		PHILADELPHIA PA 19120-4691			
MGR	BAUM, RICHARD L JR.	700 RAMONA AV	700 RAMONA AVENUE		PHILADELPHIA PA 19120-4691			
MGR	ALBRECHT, KNUTE	700 RAMONA AV	ENUE		PHILADELPHIA PA 19120-4891			
MGR	DULLUM, DAVID A.R.	700 RAMONA AY	ENUE		PHILADELPHIA PA 19120-4691			
MGR	RISSO, MICHAEL A	700 RAMONA AV	ENUE	PHILADELPHIA PA 19120-4691				
MGR	TOBIN, FRANK W	700 RAMONA AV	ENUE		PHILADELPHIA PA 19120-4691			
2. I certify filing th all fees as if m	that I am managing member/manager or its reinstatement application the reason for wed by the limited liability company have ade under oath.	the receiver or trustee empowered to dissolution has been eliminated, the lin- been paid. The information indicated of	execute this app nited liability comp on this application	plication as provided pany name satisfies to is true and accurate	for in chapter 608, F.S. I furt the requirements of section 60 , and my signature shall have	her c 8.406 the s	artify that when 3, F.S., and that ame legal effect	

Managing Member/Manager

Typed or printed name of signing Managing

Date 10/23/02 Daytime Phone # 215831 - 7743

SIMKAR®



700 Ramona Avenue Philadelphia PA 19120-4691 Telephone (215)831-7700 Fax (215)831-7703 Website: www.simkar.com

October 23, 2002

Florida Department of State Division of Corporations Registration Section PO Box 6327 Tallahassee, FL 32314

Re: Simkar LLC

Dear Sir or Madam:

Enclosed is the completed Application for Reinstatement for Simkar LLC together with our check for \$50 for the annual report fee for 2002.

Since we have no record of receiving either the 2002 Uniform Business Report form or the notice of intention to dissolve/revoke, we respectfully request that you waive the \$100 reinstatement fee.

Sincerely,

William J. Eagle / President and CEO

r resident and CEO

/ddc

Enclosures

DIVISION OF CONFORMING