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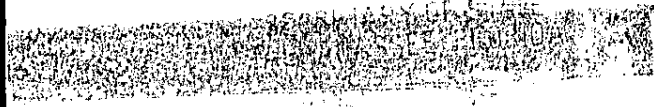
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. APPROVED AND FILED

03 OCT 16 AM 9:10

LIMITED LIABILITY COMPANY REINSTATEMENT FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS



DOCUMENT # M01000002846
1. Limited Liability Company's Name
Florida Silmaril, LLC



300023854063
10/16/03--01039--010 **150.00

2. Principal Office Address
433 Paseo de Peralta
Suite, Apt. #, etc.
City & State
Santa Fe, NM
Zip
87501
Country

3. Mailing Office Address
433 Paseo de Peralta
Suite, Apt. #, etc.
City & State
Santa Fe, NM
Zip
87501
Country

4. State/Country of Formation
New Mexico
5. Date Organized or Qualified To Do Business in Florida
12/20/01
6. FEI Number
26-0022417
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
CT Corporation
Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
Suite, Apt. #, Etc.
City
Plantation
State
FL
Zip Code
33324

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
PETER F. SOUZA
ASSISTANT SECRETARY
Date
10/13/03
REGISTERED AGENT MUST SIGN

Table with 4 columns: Titles, Name of Managing Members/Managers, Street Address of Each Managing Member/Manager, City / State / Zip. Row 1: Mgr., Rick W. Carlton, 433 Paseo de Peralta, Santa Fe, NM 87501. Includes stamp 'REINSTATEMENT 7083' and signature 'JD'.

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
10/10/03
Daytime Phone #
505-982-4374
Typed or printed name of signing Managing Member/Manager
Rick W. Carlton, Manager

CR2E041 (10/02)