

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 M01000002929

FILED

03 OCT 24 PM 1:35

1. DOCUMENT # M01000002929
 Name and Mailing Address

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

0017706 01 FP 0.352 **PRSRT T4 0 0615 34145

GLOBAL LEASING GROUP, LLC
 1083. COLLIER BLVD
 STE. 334
 MARCO ISLAND FL 34145



2. New Mailing Address City, State, Zip		4. State/Country of Formation NV	
Principal Place of Business 599 S. COLLIER BLVD MARCO ISLAND FL 34145		5. Date Organized or Qualified To Do Business in Florida 12/24/2001	
3. New Principal Place of Business Address City, State, Zip		6. FEI Number 88-0504321	
		Applied For Not Applicable	
		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent NACHEF, JOHN 1083 N COLLIER BLVD., #334 MARCO ISLAND FL 34145	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 [Signature] Date 10-22-03

REGISTERED AGENT MUST SIGN

11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	NACHEF, JOHN	1083 N COLLIER BLVD., #334	MARCO ISLAND FL 34145

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 [Signature] Date 10-22-03 Daytime Phone # 339-643-4211

Typed or printed name of signing Managing Member/Manager

CR2E084 (7/03)