## PLEASERE TALLIST UCTO SEPONE THE THOTH'S FRIM



LIMITED L COMP REINSTA	PANY TEMENT		DIV	DEPARTMENT Secretary of Sta	ite	03 007	E11.	5:04			
DOCUMENT # MO200000768  1. Limited Liability Company's Name						(\$47), 077 		5:04			
METRA CR	OSS POOL	2 GP, LLC				P	r(	(C)A			
2. Principal Office	Address	<del></del>	3. Mailing Office Address			[					
Third Millennium Group			Same as #2			4. State/Cour	ntry of For			J	
Suite, Apt. #, etc.	ress Ave	nue, #3106	Suite, Apt. #, etc.			5. Date Organ To Do Bus					
City & State	TCDB AVE	14C) #3100	City & State	City & State				March 25			
Boca Raton, Florida						6. FEI Number			<u> </u>	Maclinetals	
Zip	Country		Zip	Country		01-0617501 7			Not Applicable		
33487	Pal	m Beach					OF STATU	JS DESIRED 55.0	a Certificate	e of Status	
	<u></u>		8. 1	lame and Address of	Current Register	ed Agent					
Stree Suite City  9. I, being appoint	et Address (P.C 1201 Hays e, Apt. #, Etc. Tallahass	see	lot Acceptable)	d listilia come Cour Brian Cour Asst. V. P	Mamiliar with and a	accept the obligat	State <b>FL</b> ions of Ch	Zip Code 32301 napter 608, F.S.		(Diver)	
Signature of Registered Agent _	0	R	EGISTERED AG		Date	10/20	105				
10. Names and 9	Street Addresse	es of Managing Mei	mbers/Managers					· <del></del> -			
Titles	Name of Managing Members/Managers			Street Address of Each Managing Member/Mana							
Member Metr	Metra Capital, LLC			same as #2			900023993699				
murm					N CONTRACTOR		v0	J.			
			R		E.W.E.N		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
filing this reins	tatement applic by the limited lie der oath.	ation the reason for	r dissolution has	trustee empowered to been eliminated, the lip i prormation indicated	mited liability comp on this application	any name satisfie is true and accura	s the requ ite, and m	irements of section 60	)8.406, F.S., the same le	and that	

ACCOUNT NO. : 072100000032

REFERENCE : 287214

AUTHORIZATION

COST LIMIT : \$ 150.00

ORDER DATE: October 20, 2003

ORDER TIME : 9:54 AM

ORDER NO. : 287214-005

CUSTOMER NO: 7372082

CUSTOMER: Simon Mizrachi

The Mid-atlantic Agency

Suite 3106

7700 Congress Avenue Boca Raton, FL 33487

## REINSTATEMENT

NAME: METRA CROSS POOL 2 GP, LLC

XX RI	EINSTATEMENT		DIVIS DIVIS	03	<b>.</b> 00
PLEASE I	RETURN THE FOLLOWING AS PROOF OF FILING:		PAKE 15	0CT 2	
XX	CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING		SEEL FLOR	PH 2:	
⁻∩NͲ໓ <i>⊂</i> Ͳ	PERSON: Sara Lea	٠	TOAS	42	<u> </u>

EXAMINER'S INITIALS