
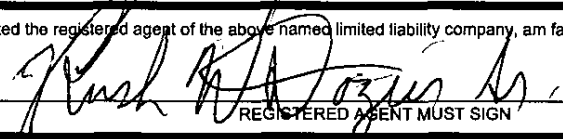
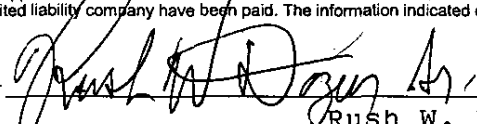


FILED

2004 NOV -2 AM 11:50

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 2004 NOV -2 AM 11:50 DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA	
DOCUMENT # M02000002737					
1. Limited Liability Company's Name <p style="text-align: center;">REDINGTON LLC</p>					
2. Principal Office Address 16400 Gulf Blvd. #401 Suite, Apt. #, etc. #401 City & State Redington Beach, Fla.			3. Mailing Office Address PO Box 8665 Suite, Apt. #, etc. City & State Madeira Beach, Fla.		
Zip 33708		Country USA		4. State/Country of Formation Kentucky, USA	
				5. Date Organized or Qualified To Do Business in Florida Oct. 16, 2002	
6. FEI Number assigned 59-3747766				<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>				\$5.00 Additional Fee required for a Certificate of Status	
8. Name and Address of Current Registered Agent					
Name Rush W. Dozier, Sr.					
Street Address (P.O. Box Number is Not Acceptable) 16400 Gulf Blvd.					
Suite, Apt. #, Etc. # 401					
City Redington Beach				State FL	Zip Code 33708
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 10-28-04 <div style="text-align: center;">REGISTERED AGENT MUST SIGN</div>					
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		
agent MGR	Rush W. Dozier, Sr.	16400 Gulf Blvd #401	Redington Beach, Fla. 33708		
Member	Patricia S. Dozier	16400 Gulf Blvd #401	Redington Beach, Fla. 33708		
REINSTATEMENT 2004			800042409438 11/02/04--01072--001 **155.00		
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 10-28-04 Daytime Phone# 727 392-1431 Rush W. Dozier, Sr.					
Typed or printed name of signing Managing Member/Manager					