## MU400000 3795

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 30, 2007

DOREEN WALLACE CSC TALLAHASSEE, FL

SUBJECT: MT FLORIDA LLC Ref. Number: M04000003795



We have received your document for MT FLORIDA LLC and the authorization to debit your account in the amount of \$200.00. However, the document has not been filed and is being returned for the following:

This company's Florida qualification was revoked in 2005. Therefore the TOTAL AMOUNT required to reinstate is \$250.00.

Also, since the addition of the word "Florida" to a name does not constitute a name difference, the actual name of this company is not currently available in Florida, because it is too similar to the name of an existing Florida entity. See printout attached.

So along with the reinstatement, this company will have to adopt an available alternate name for use in Florida.

To adopt an alternate name, the company will complete and file a WRITTEN CONSENT TO ADOPT AN ALTERNATE NAME form. The filing fee for this form is \$25.00.

ALSO, the writing on the form you submitted is very, very faint. Please submit a more legible document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 507A00052082



ION SERVICE COMPANY					
	ACCOUNT NO. :	072100000	032		
	REFERENCE :	129748	7560107		
	AUTHORIZATION :			OT SE	
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ORDER DATE :	September 5, 2007	25.01	)	SKE.F.	)
ORDER TIME :	11:38 AM	•		27 098	
ORDER NO. :	129748-005	•		DA E	
CUSTOMER NO:	7560107				
<u>-</u>					
	REINSTATEMENT	/ CONSENT NAME	TO ADOPT A	ALTERNATE	
	-			•	
NAME:	MT FLORIDA LLC	• • • •			•
	- ·-	,			
XX REINSTAT	EMENT			2) SUFT SUFT	
PLEASE RETURN	THE FOLLOWING AS PR	OOF OF FILI	ING:	77 SEP -	Transfer and
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EXAMINER'S INITIALS

CONTACT PERSON: Doreen Wallace

## WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managers	075	1			
Members of MT Florida LLC (Name of Limited Liability Company)					
a limited liability company duly organized and existing under the laws of					
(State or Country of Organization)	5 SE 21	١,			
Because the name of this foreign limited liability company does not satisfy the					
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the	410				
following name to transact business in the state of Florida:					
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)					
Date:					
Signature(s) of Manager(s) and/or Managing Member(s):					
Plane Sen Attached Signature Page					
	13.				
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