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	I EEMOL MEM	ALL INC	TROC HON	10 BEFORE		TING THIS FORM.		
COMPANY REINSTATEMENT LIMITED LIABILITY FLORIDA DEPARTMENT OF STATE Secretary of State Division of corporations					12 NOV 26 SECRETARY TALL AHASSI			
1. Limite	CUMENT # M090000 rigin Realt		roup,	, LLC	DEIM	SEE, FLORIDIT	LED 6 PH 3: 26	12
l '			Mailing Office Address 37 N Milwaukee Ave.			UPINALVIENTE		
Suite, Apt	,		Suite, Apt, #, etc.			State/Country of Formation IL		
						Date Organized or Qualified To Do Business in Florida		
i :			city & State Chicago, IL			6. FEI Number Applied For		
Zip Country		Zip		unity	20-81 7.	182198	Not Applicable	
6064	2 US	60642	US)	CERTIFICA	TE OF STATUS DESIRED 15.00 A	dditional Fee require Certificate of Status	d 1,
Street Add L S Suffe, Apt	3950 6th PL	State Zp Code		E-mail Address: 500242083375 11/26/1201006023 **238.79 Krodriguez@safeharborrealty.biz (To be used for future annual report notices)				
9. I, being appointed the registered agent of the above named limited liability company, em familiar with and accept the obligations of Chapter 808, F.S. Signature of Registered Agent REGISTERED AGENT MUSI SIGN								
Titles). Names and Street Addresses of Managing Members/Managers Titles Name of Managing Members Managers			reet Address of Each		City / State / Zip		
MBR	Edward Reagan		687 N Milwaukee Ave			Chicago, IL 60642, η		GRM
						B. BOSTIC	IK	
		····				NOV 2 7 20)12	
						EXAMINE	R	
11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 508, F.S. I further certify that when filting this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements or section 608.408, F.S., and that all less owed by the limited liability company have been paid. The information indicated on this application is true and occurate, and my signature shall have the same legal effect as if made under oath. I am award that false information submitted in a document to the Department of State constitutes a third degree fetony as provided for in s.817,155, F.S. Signature of Managing Member/Manager Date 10/30/2012 Daytime Phone # 312-445-3924								
yoed or prin	nted name of signing Managing Member/I	vlenager Edwa	ırd Reagan			THE RESIDENCE OF THE PROPERTY		