PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED AND FILED

01 SEP 28 AM 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****200.00 ****200.00

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT

DOCUMENT # M97000000847

1. Limited Liability Company's Name

Sugarland Business Center, L.L.C.,
a Virginia limited liabiity company

2. Principal Office Address		**3.** Mailing Office Address	
560 Herndon Parkway		1350 E. Newport Center Dr.	
Suite, Apt. #, etc. Suite 200		Suite, Apt. #, etc. Suite 206	
City & State Herndon, VA		City & State Deerfield Beach, FL 33442	
Zip 22070	Country	Zip 33442	Country

4. State/Country of Formation: Virginia

5. Date Organized or Qualified To Do Business in Florida: 12/15/97

6. FEI Number: 54-1749883 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Taurus Investment Group, Inc., Atten: Mrs. Linda Kassof

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******5.00 ******5.00

Street Address (P.O. Box Number is Not Acceptable): 1350 E. Newport Center Drive

Suite, Apt. #, Etc.: Suite 206

City: Deerfield Beach, FL | State: FL | Zip Code: 33442

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: Rodney Riley, Vice Pres. Date: 9/25/01
REGISTERED AGENT MUST SIGN

CR2E041 (9/00)

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
MGR.	Markus Voelkel	Hochstr 12	Willich-Schiefbahn, Germany
MGR	Uta Ackermans-Meyoen	Hochstr 12	Willich-Schiefbahn, Germany
MGR	Guenther Reibling	Suite 206 1350 E. Newport Center Dr.	Deerfield Beach, FL 33442
MGR	Rodney Riley	100 S. Orange Ave, Suite 410	Orlando, FL 32801

10-1-01

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: Rodney Riley, Manager Date: 9/25/01 Daytime Phone #: 954 428-4585

Typed or printed name of signing Managing Member/Manager