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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION FOR REINSTATEMENT**

**FLORIDA DEPARTMENT OF STATE**  
**Jim Smith**  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

03 MAR 21 AM 11:21

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

1. DOCUMENT # M98000000993

Name and Mailing Address

0004286 01 FP 0.352 \*\*PRSR T3 0 0615 33432-393744



MDF ASSOCIATES, LLC  
 344 PLAZA REAL  
 BOCA RATON FL 33432-3937



|   |                                   |  |                          |
|---|-----------------------------------|--|--------------------------|
| 2. New Mailing Address<br><br>City, State, Zip  |                                   | 4. State/Country of Formation<br><br>NY  |                          |
| Principal Place of Business<br>344 PLAZA REAL<br>BOCA RATON FL 33432  |                                   | 5. Date Organized or Qualified To Do Business in Florida<br>09/09/1998   |                          |
| 3. New Principal Place of Business Address<br><br>City, State, Zip  |                                   | 6. FEI Number<br>13-3992086<br>Applied For<br>Not Applicable   |                          |
| 8. Name and Address of Current Registered Agent<br><br>NATIONAL CORPORATE RESEARCH, LTD., INC.<br>103 N. MERIDIAN STREET<br>TALLAHASSEE FL 32301-0000   |                                   | 7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status |                          |
| 9. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br><br>City<br>FL Zip Code  |                                   |  |                          |
| 10. 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.<br>Signature of Registered Agent <u>Cynthia A. Hicks</u> Date <u>1-21-03</u><br>REGISTERED AGENT MUST SIGN <u>Cynthia A. Hicks, Asst. Sec.</u> |                                   |  |                          |
| 11. Names and Street Addresses of Each Managing Member/Manager  |                                   |  |                          |
| Title(s)  | Name of Managing Members/Managers | Street Address of Each Managing Member/Manager   | City / State / Zip       |
| MGR   | FREUNDLICH, MICHAEL               | <u>415 MADISON AVENUE</u>  | <u>NEW YORK NY 10017</u> |
|   |                                   | 344 Plaza Real   | Boca Raton, FL 33432     |
|   |                                   | REINSTATEMENT <u>02-03</u>   |                          |
|   |                                   | 000014068000<br>03/13/03--01059--023 **50.00   |                          |
|   |                                   | 000014068000<br>03/13/03--01059--024 **150.00  |                          |
|   |                                   | AL   |                          |

12. 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 Michael Freundlich Date 1/21/02 Daytime Phone # (561) 393-6275

Typed or printed name of signing Managing Member/Manager

Michael Freundlich

CR2E084 (8/02)



March 10, 2003

Florida Department of State  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

Re: MDF Associates LLC  
EIN: 13-3992086  
Document #: M98000000993

Dear Sir/Madam:

Our client, the above referenced limited liability company, has received notice from the Florida Department of State that it has been administratively dissolved or revoked effective October 4, 2002. Enclosed please find an Application for Reinstatement, as well as a check payable to the Department of State in the amount of \$200.00.

If you have any questions or need additional information, please do not hesitate to contact the undersigned.

Very truly yours,

Lester Rosenbaum

LR:fp

Enclosure

Certified Mail RRR 7104 6163 4990 0000 6176