COMPANY REINSTATEMENT



Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED

TING THIS FORM.

03 MAY -2 PM 1:55

TALLAHASSEE, FLORIDA

DOCUMENT #	M 99000000	7	3	8
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1. Limited Liability Company's Name

TVO Lakes, LLC

2. Principa	al Office Address	3. Mailing Office Addre	ess					
70 E Lake St -		10 E Lake ?	10 E Lake St		4. State/Country of Formation			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Delaware			
Smite 600		Suite 600	Suite 600		5. Date Organized or Qualified To Do Business in Florida 5//4/99			
City & State		City & State	1 7		<u></u>	- 		
Chicago IL		Chicago	Chicago 1L		6. FEI Number Applied For Not Applied by Not Applied For			
Zip	Country	Zip .	Country	7.	55.0	Additional Fe		
Leou	eol USA	10001	USA	CERTIFICATE	OF STATUS DESIRED []	r a Certificate o	f Status	
111	T	8. Name and	Address of Current Re	egistered Agent				
	Name		tions I	\				
	LEXIS NEXIS DOCU		TIONS T	<u>`</u>				
	3953 WW	Keller Rd		(E	000195771	JOSL		
	Suite, Apt. #, Etc.	<u> </u>		<u> </u>	1/U3U1U4UU1U	- ##566 (30	
	Talluhassee				State Zip Code	j		
9. 1. being	appointed the registered agent of the at		ompany, am familiar wil	th and accept the obligat	ions of Chapter 608, F.S.			
Signature o		Mackay ass REGISTEREDAGENT MUST			Date 4/30/0 3	}		
		REGISTERED AGENT MUST	r sign /				لـــــــــــــــــــــــــــــــــــــ	
10. Name	es and Street Addresses of Managing Me	embers/Managers						
Titles	Name of Managing Members/Mana	gers	Street Address of Each Managing Member/Manager		City / State / Zip			
MGRM	TVO Lukes Manag	er, Inc. 706	= Lake St,	Suik 400	chicago IL	404	01	
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}	·					· · · · · · · · · · · · · · · · · · ·		
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<u></u>				الله وسيادا	ATEMENT	W/C	<u> </u>	
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11. I certify	y that I am managing member/manager his reinstatement application the reason f	or the receiver or trustee em	powered to execute the	is application as provide	d for in chapter 608, F.S. I furth	ner certify that v	when	
all fees as if m	s owed by the limited liability company ha nade under oath.	ve been paid. The information	n indicated on this appli	cation is true and accura	te, and my signature shall have	the same legal	effect	
Signature of	· Cherry	Change	-	4/25/02	712 6	55 21 17	, ,	

Typed or printed name of signing Managing Member/Manager Chery | Charnes