PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT FLORIDA DEPARTMENT OF STATE Secretary of State Division of Corporations							FILED 080CT-2 PM 1:41		
DOCUMENT # P96000043787 1. Corporation Name RJL GROUP, INC.						S).	JUNE FAIRT OF STATE LLAHASSEE, FLORIDA		
						REINSTATEMENTOL-08			
2. Principal Office Address - No P.O. Box # 3. Mailing Offi									
1551 N. Suite, Apt. #	. Flagier D #. etc.	rive	+	1551 N. Flagler Drive Suite, Apt. #, etc.			CR2E081 (12/07)		
	W	H 03		WPH 03			4. Date Incorporated or Qualified To Do Business in Florida 05/22/1996		
City & State	alm Beach		City & State	City & State West Palm Beach			5. FEI Numbe	05 0000005	
Zip	Country		Zip	ii beacii	Country		65-0668835 Not Applicable 6- SERVISION OF SERVIS OF SER		
Florida		33401	Florida		33401		CERTIFICATE	of STATUS DESIRED for a Certificate of Status	
Name	7. Name and Address of Current Registered Agent						 		
SPIEGEL & UTRERA, P.A.							The reinstatement fee is imposed, except in circumstances which the entity did not receive		
Street Address (P.O. Box Number is Not Acceptable) 1840 Southwest 22nd Street						the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.			
Suite, Apt. #, Etc. 4th Floor									
					State Zip Code FL 33145)			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. SPIEGEUS UTRERA, P.C.: Signature of Registered Agent By: Date 7 - 2 4 - 0 8 Natalia Utrera, Vice President REGISTERED ASENT MUST SIGN									
9. Names	s and Street A	ddresses of Each Officer	ind/or Director (Flo	rida nonpro	fit corporations must li	st at le	ast 3 directors)		
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director				City / State / Zip		
PTD	Lorello, Robert John Jr.		1551 N. Flagler Drive		LPH 03	West Palm Beach, Florida 33401			
							<u>වර</u> 10/10/	U135822482 0801044008 ***450.00	
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under cath. SIGNATURE: Robert John Lorello, Jr., President Date Daytime Phone #									