

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

200517 FILED

03 JAN 14 PM 4:50

SECRETARY OF STATE TALLAHASSEE FLORIDA

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1/14 2002

MJM

DOCUMENT # 200517

1. Limited Liability Company's Name

GLOBE FUNDING, L.C.

2. Principal Office Address

3209 S. Atlantic Ave.

Suite, Apt. #, etc.

Daytona

City & State

FL

Daytona Beach Shores

Zip

Country

32118-6225

Volusia

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

4. State/Country of Formation

Florida

5. Date Organized or Qualified To Do Business in Florida

1/17/92

6. FEI Number

N/A

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

ZILL, DAVID A. ESQUIRE

Street Address (P.O. Box Number is Not Acceptable)

366 E. Graves Ave., Suite B

Suite, Apt. #, Etc.

City

ORANGE CITY

State

FL

Zip Code

32763

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

David A Zill

REGISTERED AGENT MUST SIGN

Date

1/10/03

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
MGRM	LORT, YUSUF MOHAMED	3209 S. ATLANTIC AVE.	DAYTONA BEACH SHORES, FL 32118-6225
MGRM	BAFRENKLAU, ALAN	"	"

11. I certify that I am managing member/manager of 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

[Signature]

Date

1/10/03

Daytime Phone#

386-761-2050

Typed or printed name of signing Managing Member/Manager

CR2E041 (10/02)