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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 DEC -7 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F08000002547

1. Corporation Name
All Weather, Inc.

REINSTATEMENT 2009
CR25081 (12/08)

2. Principal Office Address - No P.O. Box #
1165 National Drive

3. Mailing Office Address
1165 National Drive

Suite, Apt. #, etc.

City & State
Sacramento, CA

City & State
Sacramento, CA

Zip
95834 County

Zip
95834 County

4. Date Incorporated or Qualified To Do Business in Florida **06/05/2008**

5. FEI Number **412051381** Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED SEE ADDITIONAL INSTRUCTIONS ON CERTIFICATE OF STATUS

7. Name and Address of Current Registered Agent

NAME
C T CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD

Suite, Apt. #, Etc.

City
PLANTATION State **FL** Zip Code **33324**

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with the obligations of section 607.0606 or 617.0603, F.S.

Signature of Registered Agent *Janet Berkman* **Special Asst. Secretary** Date **12/7/09**

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporation must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Jason Hall	1165 National Drive	Sacramento, CA 95834
Sec	Michael Soonen	1165 National Drive	Sacramento, CA 95834
Dir	Don Soonen	1165 National Drive	Sacramento, CA 95834
CFO	David Rigby	1165 National Drive	Sacramento, CA 95834

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 disqualification 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 oath.

SIGNATURE: *David Rigby* **David Rigby CFO** Date **12/03/09** **916-928-1000**

SIGNATURE AND TITLE OF APPLICANT PROVIDED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

JC 12/8

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

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CORPORATION REINSTATEMENT
ALL WEATHER, INC.

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