

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

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1. Limited Liability Company's Name

ATLANTIC PAVERS AND BLOCKS LLC

2. Principal Office Address
1001 NW 12 TERRACE

Suite, Apt. #, etc.

3. Mailing Office Address
2900 NW 77 CT

Suite, Apt. #, etc.

City & State
POMPANO BEACH, FL

Zip Country
33069 USA

City & State
MIAMI, FL

Zip Country
33122 USA

4. State/Country of Formation
FLORIDA

5. Date Organized or Qualified
To Do Business in Florida 2002

6. FEI Number 20-1478837

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
DOMINICK ORTIZ

Street Address (P.O. Box Number is Not Acceptable) 2900 NW 77TH COURT 200040289632
08/18/04--01053--001 **205.00

Suite, Apt. #, Etc.

City
MIAMI

State Zip Code
FL 33122

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 [Signature]

Date 8/12/04

REGISTERED AGENT MUST SIGN

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
MGR	DOMINICK ORTIZ	2900 NW 77 CT	MIAMI, FLORIDA 33122
MGR	EC CONSTRUCTION	2900 NW 77 CT	MIAMI, FLORIDA 33122

REINSTATEMENT 2003-04

11. 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 [Signature]

Date 8/12/04

Daytime Phone# 305-592-0029

Typed or printed name of signing Managing Member/Manager DOMINICK ORTIZ

CR2E041 (10/02)