2006 LIMITED LIABILITY COMPANY REINSTATEMENT

No 189215 money order

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 NOV 28 AM 10:18

No. 3055 P. 1

DOCUMENT # L05000000146

1. Entity Name
RELIABLE FRAMING LLC

Principal Place of Business	Mailing Address
4250 GRAND AVE. DELAND, FL 32720 US	4250 GRAND AVE. DELAND, FL 32720 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

#0242006 REIN-LLC CR2E101 (11/05)

4. FEI Number: 20-2089592 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LARSON, RODNEY 4250 GRAND AVE. DELAND, FL 32720	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ Date

Until January 1, 2007, Fee will be $138.75 / After January 1, 2007, Fee will be $168.00

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM LARSON, RODNEY 4250 GRAND AVE. DELAND, FL 32720 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

REINSTATEMENT 2006

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Rodney Larson 11-10-06

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date

Oct. 24. 2006 1:43PM

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