

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000067778

**FILED**  
**Jun 06, 2008**  
**Secretary of State**

**Entity Name:** TRIPLE 3'S CARPENTRY INC.

**Current Principal Place of Business:**

6497 BASSWOOD AVENUE  
BUNNELL, FL 32110 US

**New Principal Place of Business:**

3898 CLOVE AVENUE  
BUNNELL, FL 32110 US

**Current Mailing Address:**

6497 BASSWOOD AVENUE  
BUNNELL, FL 32110 US

**New Mailing Address:**

3898 CLOVE AVENUE  
BUNNELL, FL 32110 US

**FEI Number:** 20-4899431

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LIBERTY, DENNIS  
3898 CLOVE AVENUE  
BUNNELL, FL 32110 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: DENNIS LIBERTY

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P,D ( ) Delete  
Name: LIBERTY, DENNIS  
Address: P.O. BOX 2246  
City-St-Zip: BUNNELL, FL 32110 US

Title: VP,D ( ) Delete  
Name: LIBERTY, DANAIN  
Address: 6497 BASSWOOD AVENUE  
City-St-Zip: BUNNELL, FL 32110 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP,D (X) Change ( ) Addition  
Name: LIBERTY, DAMIAN  
Address: 6497 BASSWOOD AVENUE  
City-St-Zip: BUNNELL, FL 32110 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS LIBERTY

P,D

06/06/2008

Electronic Signature of Signing Officer or Director

Date