PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG -1 PM 1:55

DOCUMENT # H39197

1. Corporation Name
DO ELECTRIC, INC.

2. Principal Office Address	3. Mailing Office Address
8560 NW 53ST	8560 NW 53 ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lauderhill, FL.	City & State: LAUDERHILL, FL
Zip: 33351 Country: USA	Zip: 33351 Country: USA

REINSTATEMENT 93-01

4. Date Incorporated or Qualified To Do Business in Florida 1-22-1985

5. FEI Number 592501652 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: DANIEL J. OSGOOD

600004537116 --3
08/16/01 01011 019
***1950.00 ***1950.00

Street Address (P.O. Box Number is Not Acceptable): 8560 NW 53 ST.

Suite, Apt. #, Etc.:

City: LAUDERHILL State: FL Zip Code: 33351

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Daniel J. Osgood (REGISTERED AGENT MUST SIGN) Date: 7-30-01

CR2E001 (9/00)

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	DANIEL OSGOOD	8560 NW 53 ST	LAUDERHILL, FL. 33351
V	LINDA OSgood	8560 NW 53 ST	LAUDERHILL FL 33351

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 dissolution 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 under section 119.07(3)(i), 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: Daniel J. Osgood DANIEL J. OSGOOD 7-30-01 954-748-0359
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #