

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



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

REINSTATEMENT 2001

FILED

OCT 17 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L00000005131

1. Limited Liability Company's Name

Calcorzi Janitorial Services LLC

2. Principal Office Address

3947 Vana Dr

Suite, Apt. #, etc.

City & State

Sarasota, FL 34241

Zip

Country

3. Mailing Office Address

3947 Vana Dr

Suite, Apt. #, etc.

City & State

Sarasota, FL 34241

Zip

Country

4. State/Country of Formation

State of Florida

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

May 3, 2000

6. FEI Number 65-1005131

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 Julio A. Calcorzi

Street Address (P.O. Box Number is Not Acceptable)

3947 Vana Dr

Suite, Apt. #, Etc.

City Sarasota

State
FL

Zip Code
34241

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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 Julio A. Calcorzi
REGISTERED AGENT MUST SIGN

Date 10/15/01

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
owner	Julio A. Calcorzi	3947 Vana Dr	Sarasota, FL 34241

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 Julio A. Calcorzi Date 10/15/01 Daytime Phone # 941-379-0337

Typed or printed name of signing Managing Member/Manager Julio A. Calcorzi