

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
L01000002035

FILED

02 OCT 31 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L01000002035

Name and Mailing Address

0009593 01 FP 0.352 **PRSR H3 0 0615 32541-235005



A1USASUPPLY.COM LLC
114 PALMETTO PLAZA #5
DESTIN FL 32541-2350



2. New Mailing Address 114 Palmetto Place #10 City, State, Zip Destin FL 32541		4. State/Country of Formation FL	
Principal Place of Business 114 PALMETTO PLAZA #5 DESTIN FL 32541		5. Date Organized or Qualified To Do Business in Florida 02/08/2001	
3. New Principal Place of Business Address 114 Palmetto Place #10 City, State, Zip Destin FL 32541		6. FEI Number 59-3710939	
		Applied For Not Applicable	
		7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

CR2E(84 (8/02)

8. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	9. Name and Address of New Registered Agent Name: RAYO, Espey Jr. Street Address (P.O. Box Number is Not Acceptable): 114 Palmetto Place #10 City: Destin FL Zip Code: 32541
--	---

10. 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: Rayo, Espey Jr. Date: 10/25/02

REGISTERED AGENT MUST SIGN

11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	ESPEY, RAY	3824 INDIAN TRAIL 60 Pelican Bay Dr.	DESTIN FL 32541 Santa Rosa Bch FL 32559
MGRM	STRICKLAND, JIM	4104 INDIAN TRAIL	DESTIN FL 32541
400008718444 10/31/02--01014--019 **155.00			

12. 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: Rayo, Espey Jr. Date: 10/25 Daytime Phone #: 850-654-7225

Typed or printed name of signing Managing Member/Manager: RAYO, ESPEY JR.