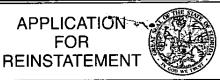
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



Typed or printed name of signing Managing Member/Manager

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CONTORATIONS

03 DEC 31 PM 5: 57

1. DOCUMENT # L0100003548

Name and Mailing Address

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2. New Mailing Address				State/Country of Formation FL			
115 Nonth Mailland Arous							
Altamente Sissach FL 32701				5. Date Organized or Qualified To Do Business in Florida 03/05/2001			
Principat Pla	ace of Business 3. New	v Principal Place of Busine	Place of Business Address		6. FEI Number Applied 59-3707892 Not Appl		
	99 WEST STATE ROAD 434	N. Maitlan ate, Zip	Maitland Al				
LOI	NGWOOD FL 32750 City, Sta	ate, Zip	FL 3270, CERTIFICATE OF STATUS DESIRED of tor a Certificate of Status				
	8. Name and Address of Current Registered	d Agent	Name and Address of New Registered Agent				
			Name				
	ALKER, BERRY J JR.		Street Address (P.O. Box Number is Not Acceptable)				
Walker & Tudhope, P.A.							
	953 Maitland Center Commons	1					
	lvd. 2 nd Floor	1	City FL Zip Code				
Maitland, FL 32751							
10. I, being appointed the registred agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.							
Signature of Registered Agent Date 12/36/03							
	REGISTERE	D AGENT MUST SIGN					
11. Names and Street Addresses of Each Managing Member/Manager							
Title(s)	Name of Managing Members/Managers		reet Address of Each aging Member/Mana			te / Zip	
MGR	MURRAY, MICHAEL E	1399 WEST S	1399 WEST STATE ROAD 434		LONGSWOOD FL 32750		
-MOR	MURRAY M. CHANE Remove	_1392_WEST-(TATS_ROAD_434		+ CH66W000 - F4- 12759-		
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filing the	fy that I am managing member/manager or the rece this reinstatement application the reason for dissolution as owed by the limited liability company have been partially and under oath.	on has been eliminated, the aid. The information indicate	e limited liability con ed on this application	npany name satistion is true and accur	es the requirements of section rate, and my signature shall h	ave the same legal effect	
Signature of Managing I	of Member/Manage Nachadis URA	1 rung jong D	Date 1	1 (11/2023 i	Daytime Phone # _467-	331-4300	