

192

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 MAR 17 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

2002-2003 L01000004513

1. Limited Liability Company's Name

Ed Stadler Trucking LLC

2. Principal Office Address

2150 Oakwind Ct

Suite, Apt. #, etc.

3. Mailing Office Address

2150 Oakwind Ct

Suite, Apt. #, etc.

City & State

St. Cloud FL

Zip

34772

Country

USA

City & State

St. Cloud FL

Zip

34772

Country

USA

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

6. FEI Number

385944184

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

Edward Keen Stadler

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

2150 Oakwind Ct

Suite, Apt. #, Etc.

600014109056

03/17/03 01010 010 **100.00

City

St. Cloud

State

FL

Zip Code

34772

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

Edward K. Stadler

REGISTERED AGENT MUST SIGN

Date

3/5/03

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
mgrm	Edward K Stadler	2150 Oakwind Ct.	St. Cloud FL 34772

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

Edward K. Stadler

Date

3/5/03

Daytime Phone

(407) 908-4590

Typed or printed name of signing Managing Member/Manager

Edward K. Stadler

CR2E041 (10/02)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

March 6, 2003

FLORIDA DEPARTMENT OF STATE
SECRETARY OF STATE
DIVISION OF CORPORATIONS

PLEASE SEE ATTACHED REQUEST FOR REINSTATEMENT. WE NEVER
RECEIVED ANY FORMS TO RENEWAL DUE TO OUR MOVE TO A NEW
LOCATION:

2150 OAK WIND CT
ST CLOUD FL 34772

ALSO ENCLOSED IS CHECK #1286 FOR \$100.00.

THANK YOU.

SINCERELY,

EDWARD K STADLER
ED STADLER TRUCKING LLC