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MPLETING THIS FORM. FILED SECRETARY OF STATE DIVISION OF CORPORATIONS **Katherine Harris** COMPANY Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 03 OCT -1 PM 3: 15 DOCUMENT # L 0100005761 Preferred Cleaning LLC 700023543337 10/03/03--01045--002 **150.00 2. Principal Office Address 3. Mailing Office Address 2007 SANNAN OZEG 4. State/Country of Formation Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Date Organized or Qualified 4-12-2001 City & State City & State 19-363622<u>0</u> Applied For TAllahassee FL. Not Applicable Country 9303 8500 Additional Respectfied Leon CERTIFICATE OF STATUS DESIRED fore Certificate of Status 8. Name and Address of Current Registered Agent ebbic Widner TO SO Number is Not Acceptable)

DO NO NINO 3 LOWP Suite, Apt. #, Etc. 39303 State TAILD. 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 10. Names and Street Addresses of Managing Members/Managers Street Address of Each Managing Member/Manager Name of Managing Members/Managers Titles City / State / Zip MGR 2050 NAMMAS LOUD 11. I cegify 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. Date/0//63 Daytime Phone #52 4-1688 Managing Member/Manager

Typed or printed name of signing Managing Member/Manager