## E READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## **APPLICATION FOR** REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

**DIVISION OF CORPORATIONS** 

1. DOCUMENT #

Name and Mailing Address

L01000019438

DIVIJION OF CORPORATIONS TALLAHASSEE, FLORIDA

FILED

2003 DEC -4 AM 10: 11

0016066 01 MB 0.309 \*\*AUTO T9 0 0615 32462-231652 tallanlılırılılırıdılırılılırılılırılılırılılırılılırılılırıl DANIESJUD & CO.,LC 3452 COOK CIRCLE VERNON FL 32462-2316

#115-159

500025202316 12/04/03-01007--002 \*\*150.00

4. State/Country of Formation



US

2. New Mailing Address

City, State, Zip  Lynn Haven, F2. 32444			FL			
City, State, Zip  Lynn Hai	IEN, FL. 324	44	5. Date Organized or C To Do Business in F		11/08/2001	
Principal Place of Business 3452 COOK CIRCLE	3. New Principal Place	New Principal Place of Business Address		6. FEI Number Applied For 59–3754476 Not Applied		
VERNON FL 32462 US	City, State, Zip		7. CERTIFICATE OF STATUS DESIRED S5.00 Additional Fee required for a Certificate of Status			
8. Name and Address of Current Registered Agent			Name and Address of New Registered Agent			
MORRIS, DANIEL B 3452 COOK CIRCLE VERNON FL 32462	t e e e e e e e e e e e e e e e e e e e	Name Street Addr	Address (P.O. Box Number is Not Acceptable) -159 1812 South Hwg. 77			
		City Ly	INN Haven	FL	Zip Code - 32444	
Signature of Registered Agent	REGISTERED AGENT MU	ST SIGN	Date	11/24/		
Title(s) Name of Members/		Street Address of E Managing Member/M				
MGRM COSSON, JUDY B	3	3452 COOK CIRCLE		VERNON FL 32462		
		<u>.</u>				
		•				
		REIN	ISTATEME	NT 200	23	
12. I certify that I am managing member filing this reinstaltement application the all fees owed by the limited liability of as if made under oath.  Signature of Managing Member/Manage  Typed or printed name of signing Managing.	e reason for dissolution has been elin impany have been paid. The informat	ninated, the limited fiability of the limited fiability of the limited on this application of the limited fiability of the limited fiable from the limited fiability of the	ompany name satisfies the recion is true and accurate, and	quirements of section my signature shall ha	608.406, F.S., and that ve the same legal effect	