FEB-16-2004 16:11 P.02

L02000008625

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
04 FEB 16 AM 9:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L02000008625

Name and Mailing Address

0010072 01 AT 0.292 **AUTO T6 0 0615 33759-162230

OVER FENCES, LLC
3030 A UNION STREET
CLEARWATER FL 33759-1622

REINSTATEMENT 2003-2004

2. New Mailing Address

City, State, Zip

4. State/Country of Formation
FL

5. Date Organized or Qualified To Do Business in Florida
04/10/2002

Principal Place of Business
3030 A UNION STREET
CLEARWATER FL 33759

3. New Principal Place of Business Address

City, State, Zip

6. FEI Number

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

HIGHTOWER, R. NATHAN
625 COURT STREET, SUITE 200
CLEARWATER FL 33756

9. Name and Address of New Registered Agent

Name

(P.O. Box Address Not Acceptable)

City FL Zip Code

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 R. Nathan Hightower

REGISTERED AGENT MUST SIGN

Date 10/27/03

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	FLAMMIA, PAT	139 CITRUS AVENUE	DUNEDIN FL 34698

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 is now in compliance with 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 Patrick J. Flammia Date 11-22-03 Daytime Phone # 727-736-1562

Typed or printed name of signing Managing Member/Manager

2-17-04

TOTAL P.02

2052

Florida Department of State
Division of Corporations
Public Access System

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DIVISION OF CORPORATION

To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : MACFARLANE FERGUSON & MCMULLEN (CLEARWATER)
Account Number : 071005001001
Phone : (727)441-8966
Fax Number : (727)442-8470

LIMITED LIABILITY REINSTATEMENT

OVER FENCES, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	$205.00

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