

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

1. DOCUMENT # L02000027637

Name and Mailing Address

0001320 01 AT 0.292 **AUTO T7 1 0615 32119-202306
B&B LAWN & TREE SERVICE LLC
1706 EASTERN RD.
SOUTH DAYTONA FL 32119-2023

2004 AUG 23 P 4: 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



US

2. New Mailing Address		4. State/Country of Formation FL	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 10/14/2002	
Principal Place of Business 1706 EASTERN RD. SOUTH DAYTONA FL 32119 US	3. New Principal Place of Business Address City, State, Zip	6. FEI Number	Applied For Not Applicable
		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent DERR, BRYAN K 1706 EASTERN RD. SOUTH DAYTONA FL 32119	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 *Bryan K Derr* **SIGNATURE REQUIRED** Date *1/2004*
REGISTERED AGENT MUST SIGN

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
MGR	DERR, BRYAN K	1706 EASTERN RD	SOUTH DAYTONA FL 32119

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 name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. This 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 *Bryan K Derr* **SIGNATURE REQUIRED** Date *1/2004* Daytime Phone # *386-304-5757*

Typed or printed name of signing Managing Member/Manager