

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L3000023435

1. Limited Liability Company's Name

All Clear Home Services LLC.

2. Principal Office Address - No P.O. Box #

Diane K. Bernet

Suite, Apt. #, etc.

27261 S. Riverside Dr.

City & State

Bonita Springs, Fl.

Zip

34135

Country

US

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

8. Name and Address of Current Registered Agent

Name

Diane K. Bernet

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

27261 S. Riverside Dr.

Apt. #, Etc.

City

Bonita Springs

State

FL

Zip Code

34135

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of
Registered Agent

Diane K. Bernet

REGISTERED AGENT MUST SIGN

Date 12/20/15

10. Names and Street Addresses of Authorized Representatives/Managers

Titles	Name of Authorized Representatives/ Managers	Street Address of Each Authorized Representative/ Manager	City / State / Zip
Mng.	Diane K. Bernet	27261 S. Riverside Dr.	Bonita Springs, Fl. 34135
Member	Michael W. Parker	27261 S. Riverside dr.	Bonita Springs, Fl. 34135

REINSTATEMENT

2015

S. HAWKES

JAN 4 A.M.

EXAMINER

11. E-mail Address: aflagit1@aol.com

(To be used for future annual report notifications)

12. I certify that I am an authorized representative/ manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, 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 requirement of section 605.0012, 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

Diane K. Bernet

12/20/15

239-495-2080

15 DEC 31 PM 12:56

FILED

CR2E041 (1/14)

4. State/Country of Formation

Lee Co. Fl. US

5. Date Organized or Qualified
To Do Business in Florida

6/26/2003

6. FEI Number

56-2386461

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required
for a certificate of status

Monetary

700280516997
12/31/15--01012--009 **238.75