

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # L03000046549

1. Limited Liability Company's Name
Carpentry Unlimited Services
6302 SW 131st Lane
Ocala, FL 34473

2. Principal Office Address
6302 SW 131st Lane

Suite, Apt. #, etc.

City & State
Ocala, FL

Zip Country
34473 US

3. Mailing Office Address
6302 SW 131st Lane

Suite, Apt. #, etc.

City & State
Ocala, FL

Zip Country
34473 US

CR2E041 (8/05)

4. State/Country of Formation
US

5. Date Organized or Qualified
To Do Business in Florida **11-21-2003**

6. FEI Number
09-3031001

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

Name

Edward T Gromatski

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

6302 SW 131st Lane

Suite, Apt. #, Etc.

City
Ocala

State
FL

Zip Code
34473

400086234374
01/25/07--01041--020 **305.00

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

Date

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Edward T Gromatski	6302 SW 131st Lane	Ocala, FL 34473

11. 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. 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

Edward T. Gromatski

Date

1/9/07

Daytime Phone #

352-502-6929

Typed or printed name of signing Managing Member/Manager

Edward T Gromatski