PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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COMPANY REINSTATEMENT COMPANY REINSTATEMENT COMPANY REINSTATEMENT COMPANY COMP							FILED 2005 APR 21 PM 3: 37			
DOCUMENT # LO30000 47309 1. Limited Liability, Company's Name Eddie's Carpenter Service, LLC								CORPORATIONS SEE, FLORIDA		
2. Principal Office Address 3. Mailing 127 44th CT E 127 4										
			Suite, Apt. #, etc.	127 44th CT E Suite, Apt. #, etc.			4. State/Country of Formation FL, USA			
				5.		5. Date Organ To Do Busi				
•			Palmetto,	City & State Palmetto, Fl			r ~	//5 () 4(/ 	plied For	
zip 34221	Countr	•	Zip 34221	Cour	•	7. CERTIFICATE	OF STATU	\$5.00 Additional	Fee required	
	8. Name and Address of Current Registered Agent									
	Little, Bruce Street Address (P.O. Box Number is Not Acceptable) 127 44th CT E Suite, Apt. #, Etc.									
	City Palmetto						State	Zip Code 34221	i .	
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										
10. Name	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		
MGR	MILES A EVANS SR			5 29 20 7 1 5 1 W			PALMETTO F (, 3427) 700054306357 12/05 01006 010 **205.00			
					REINS	TATE	ME	11 2004-05		
11. I certify that I am managing member/manager or the receiver a trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filling 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 elid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under cath. Signature of Managing Member/Manager Date 4-18-05 Daytime Phone # 94/1 - 933-374/3 Typed or printed name of signing Managing Member/Manager										