

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 OCT 29 PH 2:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L03000048627

1. Limited Liability Company's Name

BRADFORD CONSTRUCTION L.L.C.

CR2E041 (1/07)

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

76 TULLY AVE
Suite, Apt. #, etc.

3. Mailing Office Address

Box 683
Suite, Apt. #, etc.

City & State

PAVACEA, FLA.

Zip 32346 Country UNITED STATES

City & State

PAVACEA, FLA.

Zip 32346 Country UNITED STATES

4. State/Country of Formation

**5. Date Organized or Qualified
To Do Business in Florida**

6. FEI Number

74-3110013

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 FRED BRADFORD SR.

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

76 TULLY AVE

Suite, Apt. #, Etc.

City PAVACEA

State FL

Zip Code 32346

☒ A \$100 reinstatement fee is imposed, except
in circumstances which the entity did not
receive the prior notices. By checking this
box, you are certifying the prior notices were
not received and requesting the \$100
reinstatement be waived.

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 Fred W. Bradford Sr.

REGISTERED AGENT MUST SIGN

Date 10-29-07

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
<u>MEM</u>	<u>FRED BRADFORD SR.</u>	<u>76 TULLY AVE</u>	<u>PAVACEA, FLA. 32346</u>
<u>MEM</u>	<u>FRED BRADFORD JR.</u>	<u>76 TULLY AVE</u>	<u>PAVACEA, FLA. 32346</u>

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10/31/07--01054--013 **100.00

REINSTATEMENT

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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 Fred W. Bradford Sr.

Date 10-29-07

Daytime Phone # 984-5124

Typed or printed name of signing Managing Member/Manager

FRED W. BRADFORD SR.