

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAY 19 AM 10:40

DOCUMENT # L03000051321

1. Limited Liability Company's Name

~~N&D~~ N&D Construction, LLC

2. Principal Office Address

8625 SW 9th St.

Suite, Apt. #, etc.

City & State

Okeechobee, Florida

Zip

34974

Country

Okeechobee

3. Mailing Office Address

8625 SW 9th St.

Suite, Apt. #, etc.

City & State

Okeechobee, Florida

Zip

34974

Country

Okeechobee

4. State/Country of Formation

Florida, USA

5. Date Organized or Qualified
To Do Business in Florida

12-09-2003

6. FEI Number

41-2118564

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

Noah Wilcox

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

8625 SW 9th St.

Suite, Apt. #, Etc.

City

Okeechobee

State

FL

Zip Code

34974

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

Noah Wilcox

Date 4-22-06

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
MGR	Noah Wilcox	8625 SW 9th St. Okeechobee, FL 34974	Okeechobee FL 34974

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

Noah Wilcox

Date 4-22-06

Daytime Phone # 863-634-3049

Typed or printed name of signing Managing Member/Manager

Noah Wilcox