PLEASE READ ALL INSTRUCTIONS BEFORE COM

FILED Jun 13, 2005 8:00 am Secretary of State

LIMITED LIABILITY FLORIDA DEPARTMENT OF STATE

COMPANY 2005 AR		Secretary of State		06-13-2005 90320 0	11 ****50.00	
DOCUMENT # L 03000053482 1. Limited Liability Company's Name FRED L. CASEY CLC			20060090			
2. Principal Office Address	3. Mailing	Office Address				
2195 ORANGE DR		S 4ME		untry of Formation	6	
Suite, Apt. #, etc.	Suite, Apt. #	t, etc.		OKIDA janized or Qualified j		
City & State	City & State			usiness in Florida	104	
CORT ORANGE FO		City & State		6. FEI Number UU 20-046 4421		
FORT DRANGE, FL Zip Country VOCUSIN	Zip)	// Country	7.	S5.0	Not Applicable O Additional Fee required ria Certificate of Status	
	8.	Name and Address of Current Re	gistered Agent			
Name FRED L	· CASE	· ·				
Street Address (P.O. Box Number 2195 0)						
Suite, Apt. #, Etc.		,				
City PORT O.	RHNEE			State Zip Code 32/28	3	
9. I, being appointed the registered agent of the Signature of Registered Agent Tred L	· Casey	led liability company, am familiar with GENT MUST SIGN	n and accept the oblig	gations of Chapter 608, F.S. Date 5/4/6	o 4	
10. Names and Street Addresses of Managin	g Members/Manage	19	<u></u>			
Titles Name of Managing Members/N	Name of Managing Members/Managers		Street Address of Each Managing Member/ Manager		City / State / Zip	
SEC FRED L. CA	C FRED L. CASEY		2195 ORAKE DR		PORTONINGE, FL 32128	
TRES DANIEL S. C.	LES DANNEL S. CASEY		3705 PHIGE ST		PORT ORANGE, F- 32-129	
MER COREY B DIE	KMAN	56 SPRIPEWE	00 SQ	PORT ORANGE	1232129	
11. I certify that I am managing member/manafiling this reinstatement application the reas all fees owed by the limited liability comparased made under oath. Signature of Managing Member/Manager Typed or printed name of signing Managing Member of State	son for dissolution have been paid. T	is been eliminated, the limited liability he information indicated on this appli	company name satis	sfies the requirements of section 6	608.406, F.S., and that e the same legal effect	