

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 20, 2004
Secretary of State

DOCUMENT# L03000054946

Entity Name: CARPENCOR LTD. CO.

Current Principal Place of Business:

4450 NW 175TH ST
CAROL CITY, FL 33055

New Principal Place of Business:

Current Mailing Address:

4450 NW 175TH ST
CAROL CITY, FL 33055

New Mailing Address:

FEI Number: 51-0495279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARKE, STEPHEN
6790 NW 186TH ST., BLDG. #3, APT. 104
HIALEAH, FL 33015 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: CLARKE, STEPHEN
Address: 6790 NW 186TH ST., BLDG. #3, APT. 104
City-St-Zip: HIALEAH, FL 33015

Title: MGRM () Delete
Name: TAYLOR, MICHAEL
Address: 417 NE 191ST ST., 205-3
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STEPHEN CLARKE

PRES

10/20/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date