

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 NOV 30 AM 9:12

DOCUMENT #

1. Limited Liability Company's Name

L03000056492

Jake Mullens Building and Roofing, LLC

2. Principal Office Address

1380 Alt. 19

Suite, Apt. #, etc.

City & State

Palm Harbor, FL

Zip

34683

Country

US

3. Mailing Office Address

1380 Alt. 19

Suite, Apt. #, etc.

City & State

Palm Harbor FL

Zip

34683

Country

US

CR2E041 (8/05)

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

12/29/2003

6. FEI Number

200619680

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

George G. Pappas, P.A.

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

901 N. Hercules Ave.

Suite, Apt. #, Etc.

Ste. C

City

Clearwater

State

FL

Zip Code

33765-2031

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

Date 11/29/06

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
MGRM	Jake B. Mullens	1380 Alt. 19	Palm Harbor FL 34683

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

Date 11/29/06

Daytime Phone # 727-458-3152

Typed or printed name of signing Managing Member/Manager

Jake B. Mullens