

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 OCT 16 AM 9:02

DOCUMENT # 403000056765

1. Limited Liability Company's Name

J AND B FRAMING AND SIDING LLC

2. Principal Office Address

12434 Hwy 231

Suite, Apt. #, etc.

City & State

Youngstown, Florida

Zip 32466

Country

US

3. Mailing Office Address

12434 Hwy 231

Suite, Apt. #, etc.

City & State

Youngstown, FL

Zip 32466

Country

US

CR2E041 (8/05)

4. State/Country of Formation

5. Date Organized or Qualified
To Do Business in Florida

12/30/2003

6. FEI Number

20-0520531

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

Jorge Betancourt

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

12434 Hwy 231

Suite, Apt. #, Etc.

City

Youngstown

State

FL

Zip Code

32466

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

[Signature]

Date

10-12-06

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
mgem	Jorge Betancourt	PO BOX 163	Fountain, FL 32468

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10/16/06--01044--002 **255.00

REINSTATEMENT

04-06

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

[Signature]

Date

10-12-06

Daytime Phone #

850-625-3323

Typed or printed name of signing Managing Member/Manager

Jorge Betancourt