

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 JUL 13 PM 8:49

DOCUMENT # L03000057318

1. Limited Liability Company's Name

Tile & Stone By Bryan Baker L.L.C.

CR2E041 (8/05)

2. Principal Office Address

711 Greenwood St.

Suite, Apt. #, etc.

City & State

Ft. Walton Beach, Fl.

Zip

32547

Country

U.S.

3. Mailing Office Address

711 Greenwood St.

Suite, Apt. #, etc.

City & State

Ft. Walton Beach, Fl.

Zip

32547

Country

U.S.

4. State/Country of Formation

**5. Date Organized or Qualified
To Do Business in Florida**

6. FEI Number

☒ Applied For

☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for Certificate of Status

8. Name and Address of Current Registered Agent

Name

Bryan Alan Baker

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

711 Greenwood St.

Suite, Apt. #, Etc.

City

Fort Walton Beach

State

FL

Zip Code

32547

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]

REGISTERED AGENT MUST SIGN

Date

7-3-06

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	Bryan Baker	711 Greenwood St.	Ft. Walton Bch. Fl. 32547
			500077729115 07/19/06--01047--016 **250.00

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 608.405, 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

7-3-06

Daytime Phone

(850) 863-1992

Typed or printed name of signing Managing Member/Manager

Bryan A. Baker