PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT	COMPANY Secretary of State DIVISION OF CORPORATIONS		FILED 10 APR 12 AM 8: 39		
DOCUMENT # LD400006752 1. Limited Liability Company's Name				SECRETARY OF STATE TALL AHASSEE, FLORIDA	
ProCuTLAWN Service LLC			900173211439 03/26/1001014004 **414.00 cr26041 (11/09)		
2. Principal Office Address - No P.O. Box # 2723 Banyan Tree Dr.	<u> </u>	BonyanTreeDr.		4. State/Country of Formation	
Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Date Organized or Qualified To Do Business in Florida - 26-2064		
Edstwater Fla	Ed sewate		6. FEI Numbe	Applied For	
32141 USA	32141 G	Country USA	7. CERTIFICATE OF STATUS DESIRED 55.00 Additional Fee required for a Certificate of Status		
8. Name and Address of Current Registered Agent Name Discor D Fitch			A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement be waived.		
Street Address (P.O. Box Number is Not Acceptable) 2723 Pany on Thee Drive Suite, Apt. #, Etc.					
Edsewater State Zip Code FL 32141					
9. I, being appointed the registered agent of therebove named limited liability company, am familiar with and accept the obligations of Chapter,608, F.St. Signature of Registered Agent REGISTERED AGENT MUST SIGN Date					
10. Names and Street Addresses of Managing Members/Managers					
Titles Name of Managing Members/ Manag	, I	Street Address of Each Managing Member/Manager		City / State / Zip	
mgR michael S ATC	n 2723	2723 Banyon The Dri		Edsewater, Fla 32141	
		·			
				4	
	REINSTATEMENT 2008-10				
11. E-mail Address: MF, TCh 30 @ YAhoo, Com (To be used for future annual report notifications)					
12. 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 Machine I and I and I are the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when filling 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.					
Managing Member/Manager	\sim	Date	D:	aytime Phone # 200 0 17-0031	

Typed or printed name of signing Managing Member/Manager michae!





FLORIDA DEPARTMENT OF STATE **Division of Corporations**

2 of 2

FILED

SECRETARY OF STATE

AM 8: 39

March 29, 2010

PROCUT LAWN SERVICE LLC 2723 BANYAN TREE DR. EDGEWATER, FL 32141

SUBJECT: PROCUT LAWN SERVICE LLC

Ref. Number: L04000006752

We have received your document for PROCUT LAWN SERVICE LLC and your check(s) totaling \$414.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the above referenced limited liability company is no longer available. Please file an amendment changing the name of this entity. The fee to file an amendment is \$25.00.

In order to complete your filings, both the reinstatement application and name change amendment must be submitted together along with the applicable fees for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 110A00007645