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SECRETARY OF STATE
TALLAHASSEE FLORIDA

(2)

1/11

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L04000009255

1. Entity Name
BETA DRYWALL, LLC

Principal Place of Business	Mailing Address
C/O MINTZ & FRAADE, P.C. 488 MADISON AVENUE, SUITE 1100 NEW YORK, NY 10022	C/O MINTZ & FRAADE, P.C. 488 MADISON AVENUE, SUITE 1100 NEW YORK, NY 10022

01112006 REIN-LLC CR2E101 (11/05)

2. Principal Place of Business	3. Mailing Address
6601 Lyons Road	6601 Lyons Road
Suite, Apt. #, etc. A-3	Suite, Apt. #, etc. A-3
City & State Coconut Creek, FL	City & State Coconut Creek, FL
Zip 33073 Country Broward	Zip 33073 Country Broward

4. FEI Number 70-0140232 ☐ Applied For ☐ Not Applicable

6. Certificate of Status Desired ☒ $5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

UCC FILING & SEARCH SERVICES, INC.
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309

7. Name and Address of New Registered Agent

Name B. Michael Watkins
Street Address (P.O. Box Number is Not Acceptable) 6601 Lyons Road, A-3
City Coconut Creek FL Zip Code 33073

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE B. Michael Watkins President 1/10/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $100.00	In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.	Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FELDMAN, STEPHEN 5 SOUNDVIEW LANE GREAT NECK, NY 11024	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WATKINS, B. MICHAEL 672 EAST SILVER CLOUD PLACE ORO VALLEY, AZ 85737	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	REINSTATEMENT 2006	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: B. Michael Watkins, Managing Member 1/10/06 954-429-3342
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #
B. Michael Watkins

M. HODGES

Florida Department of State
Division of Corporations
Public Access System

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LIMITED LIABILITY REINSTATEMENT

BETA DRYWALL, LLC

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