

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L04000020168

1. Entity Name
M. PERDUE CONSTRUCTION, LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAY 26 AM 11:08

Principal Place of Business
4940 DONALSON RD
PANAMA CITY, FL 32404

Mailing Address
4940 DONALSON RD
PANAMA CITY, FL 32404

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04272006 REIN-LLC CR2E101 (11/05)

4. FEI Number
20-0877086

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PERDUE, MICHAEL
4940 DONALSON RD
PANAMA CITY, FL 32404

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 *Michael Perdue*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/28/06
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGRM
PERDUE, MICHAEL
4940 DONALSON RD
PANAMA CITY, FL 32404

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

500075900735
06/07/06--01010--002 **100.00

TITLE
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REINSTATEMENT 05-06

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☐ 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: *Michael Perdue*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/28/06
Date

950-932-3553
Daytime Phone #