PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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	ED LIABILITY COMPANY NSTATEMENT	Secreta	RTMENT OF STATE ry of State corporations	SECRETARY OF STATE DIVISION OF CORPORATIONS 06 OCT 25 AM 10: 22
DOC	UMENT #L04000087	373		
	Liability Company's Name			
CHAR	RLIE HEATH LANDSCAF	PING LLC		1
		3. Mailing Office Addre		CR2E041 (8/05)
	HEATH RD	7034 HEATH RD		State/Country of Formetion
Suite, Apl.	# etc.	Sulte. Apt. #, etc.		Duin Omenized or Qualifieri
City & State		City & State		To Do Business in Florida 12/03/2004
MILT	ON FL	MILTON FL		Applied For Not Applicable
² ₃ 32570	Country USA	32570	Country	7. CONTECATE OF STATIO DEDICED
0201	100/	1		- 3 - Color d. 10 Julio
	Name		Address of Current Register	red Agent
	JAMISON MARK JE		C	
	485 5 75 75 CUSTA AV	Int Acceptable)		
	SUITE C			
	ÖRANGE CITY			State Zip Code FL 32763
6 I halas				
φ. I, being	appointed the registered agent of the abo	ove named (imited liability o	impany, am familiar with end	scoept the obligations of Chapter 608, F.S.
Signature o	Apont DOIKE NO	we named limited liability of	ASS Searce	·
Signature o Registered	Apont DOIKE NO	LI) YYY (1) - EGISTERED AGENT MUS	ASS Searce	·
Signature o Registered	Agent Dorten Kle	DEGISTERED AGENT MUS	ASS Searce	etary 000 10/19/010
Signature o Registered	Agent DOHN R	EGISTERED AGENT MUS	Street Activess of Early Managing Mamber/ Mana	chy/State/Zip MILTON FL 32570
Signature of Registered 10. Name Titles	Apent DOHN R	EGISTERED AGENT MUS	Street Activess of Early Managing Mamber/ Mana	chy/State/Zip MILTON FL 32570
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Signature of Registered 10. Name Titles MGR 11. i certififiling the silf foce	Agent DOHN R R so and Street Addresson of Managing Mer Name of Managing Members/Manag CHARLIE HEATH It is m managing member/manager of the relation to reason for	PEGISTERED AGENT MUS There/Menagers TO 34 The receiver or trustee em dissolution has been elimin	Street Actress of Each Managing Mamber/ Mana HEATH RD powered to execute this appliated, the limited liability come	Chy/State/Zip MILTON FL 32570 200081198529
Signature of Registered 10. Name Titles MGR 11. I certify filing the sil foce as if m	Agent DOHN R R so and Street Addresses of Managing Mer Managing Members/Manag CHARLIE HEATH y that I am managing member/manager of a owed by the limited liability company have add under ceth.	PEGISTERED AGENT MUS There/Menagers TO 34 The receiver or trustee em dissolution has been elimin	Street Actives of Each Managing Mamber/ Mana HEATH RD powered to execute this application andicated on this application	City/State/Zip MILTON FL 32570 MILTON FL 32570 10725/06-01055-025 ***Inn. or incetion as provided for in chapter 808, F.8. I further certify that when sary name satisfies the regularments of section 608,408, F.9., and that

Charlie Heath Lo4000087373

CHARLIE HEATH LANDSCAPING LLC
10/19/2006

To whom it may concern,

I am enclosing my reinstatement form for my company. I never received the renewal notification for my company. The instructions for reinstatement indicate that if I did not receive notice, to put this in writing and the reinstatement fee would be waived.

Thank you for your assistance in this matter.

Sincerely,
Charlie Heath