PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
2006 OCT 20 PM 3:33
SECRETARY OF STATE
DIVISION OF CORPORATIONS

CR2E041 (8/05)

DOCUMENT # L04 000091336

1. Limited Liability Company's Name
Bons Ultimate Cleaning Services LLC

2. Principal Office Address	3. Mailing Office Address
1330 Miracle Strip Pkwy	SAME
Suite, Apt. #, etc.: 302	Suite, Apt. #, etc.: SAME
City & State: FORT WALTON	City & State: FORT WALTON
Zip: 32548 Country:	Zip: 32548 Country:

4. State/Country of Formation: FLORIDA

5. Date Organized or Qualified To Do Business in Florida: 12-17-2004

6. FEI Number: 113736583 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Bonetta Daugherty
Street Address (P.O. Box Number is Not Acceptable): 1330 Miracle Strip PKWY
Suite, Apt. #, Etc.: # 302
City: FORT WALTON | State: FL | Zip Code: 32548

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: Bonetta Daugherty (REGISTERED AGENT MUST SIGN) Date: 10-19-2006

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
MGRM	Joe Murphy	1330 Miracle strip Pkwy #106	Ft Walton Fla 32548
MGRM	Brad Daugherty	1330 Miracle Strip Pkwy #106	Ft Walton Fla 32548
MGRM	Bon Daugherty	1330 Miracle Strip PKWY 302	Ft walton Fla 32548
REINSTATEMENT 2005-2006			700081082457 10/20/06--01063--003 **100.00

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 608.406, 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 Managing Member/Manager: Bonetta Daugherty Date: 10-19-2006 Daytime Phone # 850-218-1496

Typed or printed name of signing Managing Member/Manager: Bonetta Daugherty

Bonks Ultimate Cleaning Services LLC
Didnt Recive annual notice for
2025 Please waive any and all Fees
Thank you For your Consideration.

Bonetha Daugherty

10-29-2006

850-218-1496.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2006 OCT 20 PM 3:33