

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

LD5000034243

1. Limited Liability Company's Name

Scott Gipper Pressure Cleaning LLC.

4202 Gullstream Rd.

200080928092
10/17/06--01049--013 **50.00

CR2E041 (8/05)

2. Principal Office Address

3. Mailing Office Address

Suite, Apt. #, etc.

Lake Worth FL.

Suite, Apt. #, etc.

City & State

33461

City & State

Country

Palm Beach

Zip

Country

4. State/Country of Formation

5. Date Organized or Qualified
To Do Business in Florida

04-21-05

6. FEI Number

202632042

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

Scott A. Gipper

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

4202 Gullstream Rd.

Suite, Apt. #, Etc.

City

Lake Worth

State
FL

Zip Code

33461

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

Scott A. Gipper

REGISTERED AGENT MUST SIGN

Date

10-12-06

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
MEM	Scott A. Gipper	4202 Gullstream Rd.	Lake Worth, FL, 33461

REINSTATEMENT

2006

DB

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

Scott A. Gipper

Date

11-2-06

Daytime Phone #

561-512-3966

Typed or printed name of signing Managing Member/Manager

Scott A. Gipper

To whom it may concern;
I Scott Gipper received a notice
of dissolution in the mail. I
called this # 850-245-6051
the woman told me to send \$50.⁰⁰
And letter stating, I did not
recieve Annual report paper's.
I'm sorry. And please call
me at 561-512-3966 if there
is anything else I need to do.
Thank You Scott A. Gipper