2007 LIMITED LIABILITY COMPANY REINSTATEMENT

REINSTATEWINE							
DOCUMENT # L05000068253				FILE			
1. Entity Name				مها دیا ا	المحقاد		
MITCHELL'S VINYL SIDING, L.L.C.					u 2.10		
				OL 10	M 2: 19		
Principal Place of Business	Mailing Address		CUC	li iaky (M STAIL.		
1697 CONCORD RD 1697 CONCORD RD			200	AHASSEE	STATE FLORIDA		
HAVANA, FL 32333	HAVANA, FL 32333		IALL				
				i eanaman an	POLICE CALL CONTRACTOR CONTRACTOR	ITA BARIA BIRBI KARIA IIN AK BIRNA H	90 3 1 1000
Principal Place of Business - No P.O. Box # 3. Mailing Address							
6199 FAIR BONNS FLLY 6199 FAILBN		LBM	1KS FRARY		anson ossili notisi masili a di	ITA MURTA ULTUR AUSTU 418 UR ULTUR II	11 88 7 119 1 8 81
Suite, Apt. #, etc.	Suite, Apt. #, etc.			07182007	REIN-LLC	CR2E101 (1/07)	
Ch. P. Ctota				4 CC1 No No			_C+4 F
City & State City & State City & State City & State		£ 2.		4. FEI Numbe	er	<u> </u>	oplied For ot Applicable
Zip Country	Zip Country Zip Cour			5. Certificate of Status Desired \$5.00 Additional			
6. Name and Address of Current	32333	CVA	45den	7 Name and	Address of New R	Fee Require	d
C. Name and Address of Current	registered Agent		Name				
MITCHELL, CHRISTOPHER			CHRISTOPHER L. MITCHELL				
1697 CONCORD RD			Street Address (P. P. Box Number is Not Acceptable) FURTHER R. D				
HAVANA, FL 32333		İ	• • • • • • • • • • • • • • • • • • • •				
			City 1Am			FL Zip Cod	⁶ 2 2 2
8. The above named entity submits this statement for	r the purpose of changing its	registere			h, in the State of Flo		and accept
the obligations of registered agent.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algnature required when reinstating) DATE							
FILE NOW!!! FEE IS \$100.00 In accordance with s. 607."						_	
	nability company did	HUCTEU	eive nie biloi ilo	uce.	FIQUIDA	a Department of State	
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9. MANAGING MEMBE	RS/MANAGERS	10.		. <u> </u>	ADDITIONS,	/CHANGES	
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