

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 DEC 29 AM 9:07

DOCUMENT # L05000069189

1. Entity Name
NIHADA FLOORING, LLC



Principal Place of Business
PO BOX 415
ORANGE SPRINGS, FL 32182

Mailing Address
PO BOX 415
ORANGE SPRINGS, FL 32182

2. Principal Place of Business

5164 Silver Lake dr.
Palatka FL 32177

3. Mailing Address

Dalton Varnadoe
PO BOX 1691

Suite, Apt. #, etc.
32177

Suite, Apt. #, etc.
St. Augustine FL

City & State
32177

City & State
32085-1691

Zip
Country

Zip
Country
USA

11272006 REIN-LLC CR2E101 (11/05)

4. FEI Number
760796694

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

VARNADOE, DALTON E JR
245 ORANGE SPRINGS CUTOFF ROAD
INTERLACHEN, FL 32148

7. Name and Address of New Registered Agent

Name
Dalton E Varnadoe Jr

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

5164 Silver Lake dr.

City Palatka 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 Dalton E. Varnadoe Jr

12/29/06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
After January 1, 2007, Fee will be \$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 MGR
NAME VARNADOE, DALTON E JR
STREET ADDRESS PO BOX 415
CITY-ST-ZIP ORANGE SPRINGS, FL 32182

☐ Delete

10. ADDITIONS/CHANGES

TITLE MGR
NAME Dalton E Varnadoe Jr
STREET ADDRESS PO BOX 1691
CITY-ST-ZIP St. Augustine FL 32085-1691

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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01/02/07--01037--001 **\$5.00

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CITY-ST-ZIP

☐ 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 Dalton E. Varnadoe Jr

12/29/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #