

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT



LO5000070917

FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

07 FEB -7 PM 2:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CR2E041 (1/07)

DOCUMENT # LO5-70917

1. Limited Liability Company's Name

J+B Painting & Waterproofing, LLC

BK  
06

2. Principal Office Address - No P.O. Box #

1466 NE 174 St

Suite, Apt. #, etc.

3. Mailing Office Address

1466 NE 174 St

Suite, Apt. #, etc.

City & State

North Miami Bch / FL

City & State

North Miami Bch / FL

Zip

33162

Country

DADE

Zip

33162

Country

DADE

4. State/Country of Formation

FL / DADE

5. Date Organized or Qualified To Do Business in Florida

7/19/2005

6. FEI Number

412180836

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

Abel Mercado

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

1466 NE 174 St

Suite, Apt. #, Etc.

City

North Miami Beach

State

FL

Zip Code

33162

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

Abel Mercado

REGISTERED AGENT MUST SIGN

Date

2-06-07

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
Mgr.	Abel Mercado	1466 NE 174 St	North Miami Bch / FL / 33162
Mgm.	Jorge Mercado	1466 NE 174 St	North Miami Bch / FL / 33162

REINSTATEMENT 2006-2007

50008848265  
02/15/07--01040--015 \*\*200.00

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

Abel Mercado

Date

2-06-07

Daytime Phone #

305 431 7374

Typed or printed name of signing Managing Member/Manager

Abel Mercado