
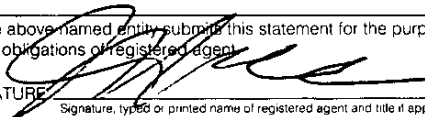
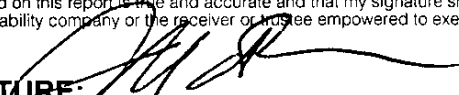


2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000071907 1. Entity Name CRETE WORKS, LLC					
Principal Place of Business 5374 CATALYST AVENUE SARASOTA, FL 34233			Mailing Address 5374 CATALYST AVENUE SARASOTA, FL 34233		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	10052007 REIN-LLC CR2E101 (1/07)	
4. FEI Number 20-3167751				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent NEMETH, MATTHEW A 11516 SWEETFLAG DR. BRADENTON, FL 34202			7. Name and Address of New Registered Agent Name NEMETH, MATTHEW A Street Address (P.O. Box Number is Not Acceptable) 5374 CATALYST AVE City SARASOTA FL Zip 34233		
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  DATE 10/9/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$50.00 After January 1, 2008, 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			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NEMETH, MATTHEW A 11516 SWEETFLAG DR. BRADENTON, FL 34202 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NEMETH, MATTHEW A 5374 CATALYST AVE SARASOTA, FL 34233 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: 			Date 10/9/07 (941) 927-1031		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					

FILED

2007 OCT 16 PM 3: 31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



10052007 REIN-LLC CR2E101 (1/07)

4. FEI Number
20-3167751

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NEMETH, MATTHEW A
~~11516 SWEETFLAG DR.~~
~~BRADENTON, FL 34202~~

Name **NEMETH, MATTHEW A**
Street Address (P.O. Box Number is Not Acceptable) **5374 CATALYST AVE**
City **SARASOTA** FL Zip **34233**

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Make check payable to
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SARASOTA, FL 34233 ☒ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Delete

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

Date **10/9/07** (941) 927-1031
Daytime Phone #