LITY FLORIDA DEPARTMENT OF STATE Secretary of State ENT DIVISION OF CORPORATIONS 5000 102921 11/16/20+-01035+-003 CR2E041 (1/14) - No P.O. Box # 3. Mailing Office Address SAME ırt 4. State/Country of Formation Florida/United States Suite, Apt. #, etc. **Date Organized or Qualified** 10/17/2005 To Do Business in Florida City & State Applied For 6. FEI Number 41-2185918 Not Applicable Zip Country Country \$5.00 Additional Fee required for a cartificate of status 7. CERTIFICATE OF STATUS DESIRED IS Name and Address of Current Registered Agent J۲. nber is Not Acceptable) Suite. rcle State Zip Code 33908 registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S. 08/10/2020 REGISTERED AGENT MUST SIGN esses of Authorized Representatives/Managers Name of Street Address of Each City / State / Zip uthorized Representatives/ Authorized Representative/ Manager Managers\_ rnest N. Freeman Jr. 16220 Via Solera Circle, Apt# 106 Fort Myers, FL. 33908 16220 Via Solera Circle, Apt# 106 Rhonda E. Freeman Fort Myers, FL. 33908 EEBUILDQ@GMAIL.COM (To be used for future annual report notifications) uthorized representative/ manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, F.S. I further reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirement of section till fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature effect as if made under oath. I am aware that lake information submitted in a document to the Department of State constitutes a third degree . 817,155, F.S.

239-271-0767