

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L06000000015

1. Limited Liability Company's Name

HART HEATING & AIR, LLC.

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

204 SILVER LK TERR

Suite, Apt. #, etc.

3. Mailing Office Address

204 SILVER LK TERR

Suite, Apt. #, etc.

City & State

PALATKA, FL

City & State

PALATKA, FL

Zip

32177

Country

USA

Zip

32177

Country

USA

8. Name and Address of Current Registered Agent

Name

JONATHAN A HART

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

204 SILVER LK TERR

Suite, Apt. #, Etc.

City

PALATKA

State

FL

Zip Code

32177

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

1/10/12

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
MGRM	JONATHAN A HART	204 SILVER LK TERR	PALATKA, FL 32177
MGRM	KATIE A HART	204 SILVER LK TERR	PALATKA, FL 32177

REINSTATEMENT 11-12

01-14-12

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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Managing
Member/Manager

[Signature]

Date 01/09/2012

Daytime Phone #

386-937-5824

Typed or printed name of signing Managing Member/Manager JONATHAN A HART

\$516.25
Div of Corp

2012 JAN 13 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E041 (1/11)

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified
To Do Business in Florida

12/30/2005

6. FEI Number

55-0913493

Applied For

Not Applicable

7.

CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

E-mail Address:

600218304966
01/13/12--01026--002 **516.25

lisa@trimbookkeeping.com

(To be used for future annual report notices)