2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

07 DEC 27 PM 2:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L06000024376

1. Entity Name
HARDSCAPE SPECIALISTS I, LLC

Principal Place of Business	Mailing Address
8811 STATE ROAD 52, SUITE 28 HUDSON, FL 34667	8811 STATE ROAD 52, SUITE 28 HUDSON, FL 34667

12102007 REIN-LLC CR2E101 (1/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
6108 Sherwin Drive	6108 Serwin Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Port Richey, Florida	City & State: Port Richey, Florida
Zip: 34668 Country: USA	Zip: 34668 Country: USA

4. FEI Number: 760817584 Applied For ☐ Not Applicable ☒

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

6. Name and Address of Current Registered Agent

LEWICKI, MICHELLE
15468 BURBANK DRIVE
BROOKSVILLE, FL 34604

7. Name and Address of New Registered Agent

Name: Doug Klunder
Street Address (P.O. Box Number is Not Acceptable): 6108 Sherwin Drive
City: Port Richey FL Zip Code: 34668

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: Doug Klunder DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After January 1, 2008, Fee will be $200.00

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM LEWICKI, MICHELLE 216 ROLLINGWOOD ROCKFORD, MI 43941	XX Delete	MGRM Doug Klunder 6108 Sherwin Drive Port Richey, Florida 34668	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM VESPER, DALE 8811 STATE ROAD 52, SUITE 28 HUDSON, FL 34667	XX Delete	MGRM Mitchell Vesper 6108 Sherwin Drive ~~Port Richey, Florida 34668~~	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	200113350392 12/21/07--01029--008 **150.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	REINSTATEMENT 2007	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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 605, Florida Statutes.

SIGNATURE: Doug Klunder
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #