## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT  FLORIDA DEPARTMENT OF STATE Secretary of State ** DIVISION OF CORPORATIONS			้งเด	SECRETARY OF STATE DIVISION OF CORPORATIONS  08 SEP 19 PM 2: 09		
DOCUMENT # 2 06000031250						
PCH Painting LLC						
				CR2E041 (8/05)		
2. Principal Office Address 595 Samuels T	3. Mailing Office Add 595 Sci m	<u></u>		ntry of Formation		
Suite. Apt. #, etc.			FLORID	FLOFIDE USA.  5. Date Organized or Qualified To Do Business in Florida 2 - 0 6 - 0 6		
City & State City & State		6. FEI Numb				
Deland FLocida Zip Country	Zip	Country		99543 , Not Applicable		
32724 Volusia	32724	Jolusia	7. CERTIFICATE	7. CERTIFICATE OF STATUS DESIRED Status desiration of Status		
8. Name and Address of Current Registered Agent						
Donald R fish  Street Address (P.O. Box Number is Not Acceptable)  595 Samuel ST  Suite, Apt. #, Etc  City  Deland  State Zip Code  FL 32724						
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 Pegistered Agent Date 9-9-08  REGISTERED AGENT MUST SIGN						
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		
MBA Donald R F	ish 59	595 Samuel ST		Deland FLA 32724		
MGRM						
	REINSTATEMENT					
				08 only Dark		
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/Manage Donald R. Fish Date 9-9-08 Daytime Phone # 386-878-3836						
Typed or printed name of signing Managing Member/Manager _ Don_ald _ R FISh						