

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2013 MAY 14 PM 2:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT #

L06000033328

1. Limited Liability Company's Name

Solar Power Electric LLC

400246902464  
05/16/13--01001--002 \*\*\$625.00  
CR2E041 (1/11) 10-13

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

965 SE 4th

3. Mailing Office Address

965 SE 4th

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. State/Country of Formation

5. Date Organized or Qualified  
To Do Business in Florida

3-29-06

City & State

Hialeah FL

City & State

Hialeah FL

Zip

33010

Country

DADE

Zip

33010

Country

DADE

6. FEI Number

L06000033328

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required  
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Justa Munne

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

965 SE 4th

Suite, Apt. #, Etc.

City

Hialeah

State

FL

Zip Code

33010

E-mail Address:

REINSTATEMENT

GMunne@EarthMovers.us

(To be used for future annual report notices)

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

Justa Munne

Date 4-30-13

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
MGR	Justa Munne	965 SE 4th	Hialeah FL 33010
MGR	Christina Munne	965 SE 4th	Hialeah FL 33010

400246902464  
04/17/13--01035--019 \*\*\$30.00  
B. BOSTICK

MAY 15 2013

EXAMINER

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

Justa Munne

Date 4-30-13

Daytime Phone # 305-965-8852

Typed or printed name of signing Managing Member/Manager

I send you \$30<sup>00</sup>

For Amendment that you set Back  
To me. with the 30<sup>00</sup> For the

Reinstatement of Solar Power Electric

Gene Murre. 4-30-13

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 18, 2013

JUSTA MUNNE  
SOLAR POWER ELECTRIC LLC  
965 SE 4 STREET  
HIALEAH, FL 33010

SUBJECT: SOLAR POWER ELECTRIC, LLC  
Ref. Number: L06000033328

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for SOLAR POWER ELECTRIC, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 413A00009348