PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.									
LIMITED LIABILITY COMPANY REINSTATEMENT OF STATE Secretary of State DIVISION OF CORPORATIONS						2009 JUH - 3 AM 10			
DOCUMENT # L06000080307 1. Limited Liability Company's Name A & B CLEANING & PROPERTY MAINTENANCE						SECKETARY OF STATE TALLAHASSEE, FLORIDA 700155897197 05/13/0901031016 **521.25			
N		7		· 			05/13/0901031016 **521.25 CR2E041 (10/08)		
2. Principal Office Address - No. 35250 SW 177TH COL		3. Mailing Off 35250 SW			IRT	ļ			
Suite, Apt. #, etc.		Suite, Apt. #, e					FLORIDA, MAIMI-DADE		
156						ľ	5. Date Organized or Qualified To Do Business in Florida 08/14/2006		
,			ity & State				6. FEI Number Applied For		
FLORIDA CITY, FL	FLORIDA CITY, FL					33-1158550 Not Applicable			
Zip Coun 33034 MIAi	ntry MI-DADE	Zip 33034		Count	try MI-DADE		7. CERTIFICATE	OF STATUS DESIRED (55.00 Action a Control	tditional Fee required Certificate of Status
8. N	lame and Address of	Current Registe	ered Agent	ı			1		
Name DOUGLAS J. PRACHI	ER						A \$100 reinstatement fee is imposed, except		
Street Address (P.O. Box Number is Not Acceptable) 317 N. KROME AVE						in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were			
Suite, Apt. #, Etc.						not received and requesting the \$100 reinstatement be waived.			
City HOMESTEAD	State Zip Code 33030				·				
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 REGISTERED AGENT MUST SIGN							Date _05/08/2009		
10. Names and Street Addresses of Managing Members/Managers									
Titles Managi	Titles Name of Managing Members/ Managers			Street Address of Each Managing Member/Manag			City / State / Zıp		
MGRM WILLIAM HOOLE			35250 SW 177TH COURT #*			IRT#	±156	FLORIDA CITY, FL 33034	
MGRM ANNA GRAHA	IGRM ANNA GRAHAM			35250 SW 177TH COURT #1			[‡] 156	FLORIDA CITY, FL 33034	
MGR₩ JIMMIE MANI	JIMMIE MANDER			35250 SW 177TH COURT #			±156	FLORIDA CITY FL 33034	
	R					ST	ATEN	07-09	AL
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 filling 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/Manager Date 05/08/2009 Daytime Phone # 305-240-1900									

Typed or printed name of signing Managing Member/Manager WILLIAM HOOLE