

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L06000111743 1. Entity Name VIKING UNDERGROUND LLC					
Principal Place of Business 4461 NW THIRD COURT PLANTATION, FL 33317			Mailing Address 4461 NW THIRD COURT PLANTATION, FL 33317		
2. Principal Place of Business - No P.O. Box # _____ Suite, Apt. #, etc. _____		3. Mailing Address 6919 W. BROWARD BLVD. Suite, Apt. #, etc. #207 City & State PLANTATION, FL Zip 33317 Country USA			
City & State _____		4. FEI Number 20-5912705		Applied For <input type="checkbox"/> Not Applicable	
Zip _____ Country _____		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent BAILUS, LEILA M 4461 NW THIRD COURT PLANTATION, FL 33317			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____		
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: DATE: 7/14/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$277.50		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BAILUS, LEILA M 4461 NW THIRD COURT PLANTATION, FL 33317	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BAILUS, DAVID P 1628 NORTH K STREET LAKE WORTH, FL 33460	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BLANSHINE, ROLLIN F JR 3012 NE 17 AVENUE POMPANO BEACH, FL 33064	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
<div style="display: flex; justify-content: space-between;"> <div> 600133811006 07/31/08--01011--022 **282.50 </div> <div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div> </div> <div style="text-align: center; font-size: 2em; font-weight: bold; margin-top: 10px;"> REINSTATEMENT 07, 08 </div>					
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 608, Florida Statutes.					
SIGNATURE:			Date: 7/14/08 (954) 792-6242		