PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

		TEE TOE TIE TO			10.10 50					
COMPANY					DEPARTMENT OF STATE Secretary of State Ision of corporations			FILED 10 MAR 19 AM 10: 14		
DOCUMENT # L 07000010065							TALLAHASSEE, FLORIDA			
1. Limited Liability Company's Name ROOSTER FENCE LUB DECK GLC							ALLAMASSEE, FLORIDA			
1 2 2 4 4 1							800171179228 03/04/1001003016 **143.75 CR2E041 (11/09)			
WIV-115714										
		ess - No P.O. Box#	3. Malling Office Address 505 NEZSON POINT ROAD			State/Country of Formation				
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			FLOCIDA F. Data Conspired of Qualified				
City & State City				ry & State			To Do Business in Florida JAN 27 2007			
piceville, fl			NICEVILLE FL				6. FEI Number Applied For Not Applicable			
•		Country OKA loos A	32579	Country US			7. CERTIFICATE	RTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status		
8. Name and Address of Current Registered Agent										
Name ROGER J KENDALL							A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100			
Street Address (P.O. Box Number is Not Acceptable) SOS NELSON POINT ROAD										
Suite, Apt. #, Etc.										
NICE VILLE					State Zip Code FL 32578			reinstatement be waived. 300171179228 03717/1001037009 **277,50		
9. i, being appointed the registered agent of the above named limited liability company, am familiar with and a Signature of Registered Agent Rogun Kendull							accept the obligations of Chapter 808, F.S. Date FB 27 2010			
REGISTERED AGENT MUST SIGN								Date	, , _	
10. Names and Street Addresses of Managing Members/Managers										
Titles	Name of Managing Members/Managers			Street Address of Each Managing Member/Manager			er	City / State / Zip		
MGR	ROGER J KENDALL			SOUT NELSON POINT LOA			LOAD	NILEVILLE FL	32578	
					,		:			
REINSTATEMENT08-10										
					3					
								08-2010		
11. E-mail Address: <u>foger Kendall (a) hatmall</u> . Com (To be used for future enruel report notifications)										
filing th	ils reinstateme	ent application the reason for c	lissolution has t	trustee emp	powered to exe	cute this applic	ation as provided	for in Chapter 808, F.S. I furthe the requirements of section 600	3.406. F.S., and that	
all fees cwed by the limited liability company have been paid. The information indicated on this ap as if made under oath. Signature of Managing Member/Manager						ils application is	on is true and accurate, and my signature shall have the same legal effect 27 2010 Daytime Phone # 250 279 6449			
Tunad or ori	inted name of	einninn Mononinn Momher/M	tononar Ro	aer	J KENO					