


2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L07000099298 1. Entity Name A1 CLEANING SYSTEMS, LLC					
Principal Place of Business 1916 SPARKMAN ROAD PLANT CITY, FL 33566 US			Mailing Address 1916 SPARKMAN ROAD PLANT CITY, FL 33566 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 26-1160251	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent CANTU, DANIEL 1916 SPARKMAN ROAD PLANT CITY, FL 33566				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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
FILE NOW!!! FEE IS \$138.75 After January 1, 2009, Fee will be \$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	MGRM CANTU, DANIEL 1916 SPARKMAN ROAD PLANT CITY, FL 33566	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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REINSTATEMENT 2008					
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: <u>Daniel Cantu</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				11-10-08 Date	

FILED
 08 NOV 19 PM 3:55
 SECRETARY OF STATE
 TALLAHASSEE, FL



11102008 REIN-LLC CR2E101 (1/07)

4. FEI Number **26-1160251**

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

FILE NOW!!! FEE IS \$138.75
After January 1, 2009, Fee will be \$277.50

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE	MGRM	TITLE	
NAME	CANTU, DANIEL	NAME	
STREET ADDRESS	1916 SPARKMAN ROAD	STREET ADDRESS	
CITY - ST - ZIP	PLANT CITY, FL 33566	CITY - ST - ZIP	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		TITLE	
NAME		NAME	
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CITY - ST - ZIP		CITY - ST - ZIP	
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CITY - ST - ZIP		CITY - ST - ZIP	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

REINSTATEMENT
2008

SIGNATURE: Daniel Cantu
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

11-10-08