

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
2014 FEB 15 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L09000042894

1. Limited Liability Company's Name

B & D Trucking and Equipment Co LLC*

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

2845 S 90TH STRET

Suite, Apt. #, etc.

3. Mailing Office Address

2845 S. 90TH ST

Suite, Apt. #, etc.

City & State

TAMPA FLORIDA

City & State

TAMPA, Florida

Zip

33619

Country

Hills. USA

Zip

33619

Country

USA

CR2E041 (1/14)

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

3/10/2009 ~~9/22/2010~~

6. FEI Number

300559463

☐ 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

Albert Cazin

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

2525 Park City Way

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33609

900256413679
02/21/14--01005--004 **138.75

900256413679
02/05/14--01024--010 **238.75

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

Signature of
Registered Agent

Albert Cazin

REGISTERED AGENT MUST SIGN

Date **1-29-14**

10. Names and Street Addresses of Authorized Representatives/Managers

Titles	Name of Authorized Representatives/ Managers	Street Address of Each Authorized Representative/ Manager	City / State / Zip
owner	POLLEN DAVID A JR.	2845 S 90th street	Tampa florida 33619

REINSTATEMENT

S. HAWKES

FEB 21 A.M.

S. HAWKES

FEB 6 A.M.

EXAMINER

EXAMINER

377.50

2013 / 2014

11. E-mail Address: **pmsmotorsports@aol.co.**

(To be used for future annual report notifications)

12. I certify that I am an authorized representative/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 605.0012, 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 to the Department of State constitutes a third degree felony as provided in s. 817.155, F.S.

Signature of

Authorized Representative/Manager

Albert Cazin

Date **1-31-14**

Daytime Phone # **813-267-0637**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 6, 2014

B & D TRUCKING AND EQUIPMENT CO., LLC
2845 S. 90TH ST.
TAMPA, FL 33619

SUBJECT: B & D TRUCKING AND EQUIPMENT CO., LLC
Ref. Number: L09000042894

We have received your document for B & D TRUCKING AND EQUIPMENT CO., LLC and your check(s) totaling \$238.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2013 through 2014; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$138.75.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 014A00002747