

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L1400012131

1. Limited Liability Company's Name

Darin's Painting and Power Washing
LLC

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

42 W. Oak St Lot D2

Suite, Apt. #, etc

3. Mailing Office Address

Suite, Apt. #, etc

City & State

Osprey FL

Zip

34229

Country

United States

City & State

Zip

Country

8. Name and Address of Current Registered Agent

Name

Darin Joseph Carmen

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

42 W. Oak St Lot D2

Apt. #, Etc

City

Osprey FL

State

FL

Zip Code

34229

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

Darin J. Carmen

REGISTERED AGENT MUST SIGN

Date

12-9-15

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
AL			
MGR	Darin J Carmen	42 W. Oak St Lot D2	Osprey FL 34229
		S. HAWKES	S. HAWKES
REINSTATEMENT		DEC 31 AM.	DEC 15 AM.
		EXAMINER	EXAMINER

11. E-mail Address:

(To be used for future annual report notifications)

I certify that I am an authorized representative/ manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, 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 requirement 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 in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

Signature of authorized representative/member

Darin J. Carmen

Date

12/9/15

Daytime Phone #

941-961-5878

Typed or printed name of signing authorized representative/member

Darin J. Carmen

FILED

15 DEC 30 PM 1:04

CR2E041 (1/14)

4. State/Country of Formation

USA

5. Date Organized or Qualified
To Do Business in Florida

1/1/2013

6. FEI Number

138 76 2166

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a certificate of status

500280035695

12/14/15--01035--003 **238.75



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 15, 2015

DARIN'S PAINTING AND POWERWASHING L.L.C.
42 W OAK ST LOT D2
OSPREY, FL 34229

SUBJECT: DARIN'S PAINTING AND POWERWASHING L.L.C.
Ref. Number: L14000121131

We have received your document for DARIN'S PAINTING AND POWERWASHING L.L.C. and your check(s) totaling \$238.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the street address of each officer/director.

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

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 115A00026173