PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 NOV -9 AM 7:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E041 (8/05)

DOCUMENT # L99000004674

1. Limited Liability Company's Name
PHB, L.L.C.

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2. Principal Office Address		3. Mailing Office Address	
PO Box 1229		PO Box 1229	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Brewton, AL		City & State: Brewton, AL	
Zip: 36427	Country: USA	Zip: 36427	Country: USA

4. State/Country of Formation: Florida

5. Date Organized or Qualified To Do Business in Florida: 07/30/1999

6. FEI Number: 59-3612190 ☐ 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: Christopher Hart
Street Address (P.O. Box Number is Not Acceptable): 34990 Emerald Coast Parkway
Suite, Apt. #, Etc.: Suite 301
City: Destin
State: FL
Zip Code: 32541

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent _____ Date November 8, 2005
REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/ Managers	Street Address of Each Managing Member/ Manager	City / State / Zip
MGR	Paul D. Owens, Jr.	PO Box 1229	Brewton, AL 36427

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REINSTATEMENT 2001-2005

11. I certify that I am managing member/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 608.406, 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.

Signature of Managing Member/Manager _____ Date 11/08/2005 Daytime Phone # 251-867-7715

Typed or printed name of signing Managing Member/Manager: Paul D. Owens, Jr.