

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 APR 19 AM 7:54

DOCUMENT # M02000001551

1. Limited Liability Company's Name

National Development and Construction, LLC

2. Principal Office Address

3847 Secretariat Dr.

Suite, Apt. #, etc.  
—

City & State

Baton Rouge, LA

Zip  
70816

Country  
US

3. Mailing Office Address

3847 Secretariat Dr.

Suite, Apt. #, etc.  
—

City & State

Baton Rouge, LA

Zip  
70816

Country  
US

4. State/Country of Formation

Louisiana / US

5. Date Organized or Qualified  
To Do Business in Florida

6/17/02

6. FEI Number

90-0010255

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

Smart Resolution, Inc

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

10400 Camelback Lane

Suite, Apt. #, Etc.  
—

City

Boca Raton

State

FL

Zip Code

33498

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

[Signature]

Date 04/13/2004

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
<u>my rm</u> <u>man</u>	<u>Klay Johnson</u>	<u>3847 Secretariat Dr.</u>	<u>Baton Rouge, LA 70816</u>

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

[Signature]

Date 4/8/04

Daytime Phone # 225-295-3154

Typed or printed name of signing Managing Member/Manager

Klay Johnson

CR2E041 (10/02)

April 13<sup>th</sup> 2004

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**Object: LLC Reinstatement - National Development and Construction LLC**

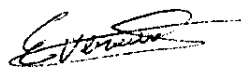
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Dear Sir or Madam,

Please find enclosed a check in the amount of \$200.00 as a request for the Reinstatement of the company National Development and Construction LLC (\$100 for the reinstatement and 2x \$50 for the years 2003 and 2004 during which the company was dissolved).

Thank you for your cooperation.

Best Regards,



Natalie Everaert  
President Smart Resolution, Inc.  
Registered Agent for National Development and Construction LLC