PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

С	ED LIAB OMPAN ISTATEN	IY (S	DEPART Secretary ISION OF CO	y of S		i i			
DOCUMENT # M05000003184 1. Limited Liability Company's Name Baker Drywall Louisiana, LLC								2001 DEC 12 P 3: 58 SECRETARY OF STATE TALLAHASSEE. FLORIDA		
2. Principa 1161(al Office Addre	3. Mailing 0	3. Mailing Office Address O Box 38299				CR2E041 (1/07) 4. State/Country of Formation			
Suite, Apt. #	#, etc.		Suite, Apt. #, etc.							
City & State	<u> </u>		City & State					5. Date Organized or Qualified To Do Business in Florida 6/13/05		
Baton Rouge, LA			Dallas, TX		T		20207	78692	Applied For Not Applicable	
^{zip} 5238	8	USA	^{Zip} 75238		US	\$A	7. CERTIFICA		Additional Fee required Certificate of Status	
		8. Name and Address of	Current Regis	tered Agen	it					
្ត្រី Corporation System										
1200 South Pine Island Road							recei			
Suite, Apt. #, Etc.							not r			
Plant		State 33324				reinstatement be waived.				
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										
REGISTERED AGENT MUST SIGN 10. Names and Street Addresses of Managing Members/Managers										
Titles	<u> </u>	Name of Managing Members/Manage		Street Address of Eac				City / State / /	City / State / Zip	
Manager	├	nen R. Baker	PO Box 38299					Dallas, TX 75238		
Manager	Micha	ael Sireno		PO Box 38299				Dallas, TX 75238		
								1270 07-013987545 1270 07-0130012 **200.00		
	PEINSTATEMENT 06-07 M									
								A		
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 filling 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 12/03/07 Daytime Phone #972-289-5534										
Typed or printed name of signing Managing Member/Manager James Purser										