

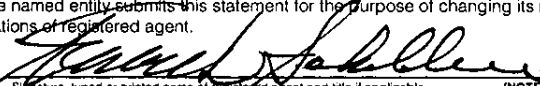
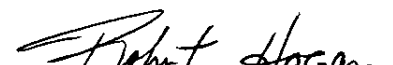


2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 DEC 11 AM 9:25

DOCUMENT # M05000003985 1. Entity Name S & H CONSTRUCTION, L.L.C.					
Principal Place of Business 1700 EMORY FOLMAR BOULEVARD MONTGOMERY, AL 36110			Mailing Address 1700 EMORY FOLMAR BOULEVARD MONTGOMERY, AL 36110		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P.O. Box 242942			
City & State		City & State Montgomery, AL			
Zip		Zip 36124-2942			
Country		Country USA			
4. FEI Number 20-0355030				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				10232006 REIN-LLC CR2E101 (11/05)	
6. Name and Address of Current Registered Agent SCHILLECI, FRANK 511 LANTANA STREET PANAMA CITY BEACH, FL 32407-3119			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 40%; text-align: center;"> <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 20%; text-align: right;"> <small>DATE</small> </div> </div>					
FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$200.00			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOGAN, ROBERT W 2333 HALCYON BOULEVARD MONTGOMERY, AL 36117		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: center;"> 100081402451 10/31/06--01084--007 **150.00 </div>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 40%;"> SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER/MANAGER, OR AUTHORIZED REPRESENTATIVE</small> </div> <div style="width: 40%; text-align: right;"> REINSTATEMENT 2006 <small>10/23/06 334-270-2031</small> <small>Date Daytime Phone #</small> </div> </div>					