

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

19.183

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2021 JUN 13 AM 3:21

500368830585

DOCUMENT # M08000001265

1. Limited Liability Company's Name
COOPER LIGHTING, LLC

2. Principal Office Address - No P.O. Box #
1121 Highway 74 S

Suite, Apt. #, etc.

City & State
Peachtree City GA

Zip Country
30269 USA

3. Mailing Office Address
1121 Highway 74 S

Suite, Apt. #, etc.

City & State
Peachtree City GA

Zip Country
30269 USA

CR2E041 (1/14)

4. State/Country of Formation
DE

5. Date Organized or Qualified
To Do Business in Florida **03/17/2008**

6. FEI Number
76-0554120

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
CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable) Suite,
1201 HAYS STREET

Apt. #, Etc.

City State Zip Code
TALLAHASSEE FL 32301

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 *Clayton Wiland, assistant vice president* Date **7/13/21**
REGISTERED AGENT MUST SIGN

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
President	Kraig Kasler	1121 Highway 74 S	Peachtree City, GA 30269
Sec./VP/GC	Michael L. Manning	1121 Highway 74 S	Peachtree City, GA 30269
CFO/Treas.	Roger Dierckx	1121 Highway 74 S	Peachtree City, GA 30269
VP	Brian Jacobs	1121 Highway 74 S	Peachtree City, GA 30269
VP	Laura Riquelme	1121 Highway 74 S	Peachtree City, GA 30269

11. E-mail Address: **complianceemail@cscglobal.com**

(To be used for future annual report notifications)

(12) 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 *Michael L. Manning* Date **July 13, 2021** Daytime Phone # **(978) 290-3211**

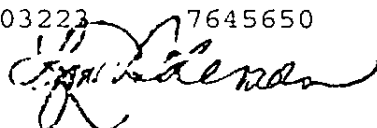
Typed or printed name of signing authorized representative/member **Michael L. Manning**

T. MOORE
JUL 19 2021

pg. 203

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

2021 JUL 13 PM 3:55

ACCOUNT NO. : I20000000195
REFERENCE : 903223 7645650
AUTHORIZATION : 
COST LIMIT : \$ 500.00

ORDER DATE : July 13, 2021
ORDER TIME : 2:30 PM
ORDER NO. : 903223-005
CUSTOMER NO: 7645650

REINSTATEMENT

NAME: COOPER LIGHTING, LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS _____

OK to file req. amt.,
per LK/TTM (\$377.50)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

pg. 3 of 3

July 15, 2021

COOPER LIGHTING, LLC
1121 HIGHWAY 74 S
PEACHTREE CITY, GA 30269

SUBJECT: COOPER LIGHTING, LLC
Ref. Number: M08000001265

RESUBMIT

Please give original
submission date as file date.

We have received your document for COOPER LIGHTING, LLC and check(s) totaling \$. However, your check(s) and document are being returned for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

FYI: The registered agent signature must be an individual signing on behalf of the entity, if one is listed.

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

Tanya L Moore
Regulatory Specialist II

Letter Number: 521A00016325

RECEIVED
2021 JUL 16 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA