

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000004038

FILED  
Oct 29, 2008  
Secretary of State

Entity Name: MIAMI-DADE LIMESTONE PRODUCTS ASSOCIATION, INC.

**Current Principal Place of Business:**

13292 NW 118 AVE  
MIAMI, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

13292 NW 118 AVE  
MIAMI, FL 33178

**New Mailing Address:**

FEI Number: 59-0663819      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

TOMAS-MARTINEZ, VICTORIA E  
13292 NW 118 AVE  
MIAMI, FL 33178      US

**Name and Address of New Registered Agent:**

TOMAS-MARTINEZ, VICTORIA E  
13292 NW 118 AVE  
MIAMI, FL 33178      US

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.

SIGNATURE: VICTORIA E. TOMAS-MARTINEZ

10/29/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: KIRKMYER, CLIFF  
Address: 13292 NW 118 AVE  
City-St-Zip: MIAMI, FL 33178

Title: ST      ( ) Delete  
Name: HURLEY, JIM  
Address: 13292 NW 118 AVE  
City-St-Zip: MIAMI, FL 33178

Title: D      ( ) Delete  
Name: VECELLIO, LEO  
Address: 13292 NW 118 AVE  
City-St-Zip: MIAMI, FL 33178

Title: D      ( ) Delete  
Name: JOHNSON, HARDY  
Address: 13292 NW 118 AVE  
City-St-Zip: MIAMI, FL 33178

Title: D      ( ) Delete  
Name: BAKER, JOHN  
Address: 13292 NW 118 AVE  
City-St-Zip: MIAMI, FL 33178

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM HURLEY

MR

10/29/2008

Electronic Signature of Signing Officer or Director

Date