PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORATION NSTATEMENT	DEPARTMENT OF STATE Secretary of State		FILED SECRETARY OF STATE TALLAHASSEE.FLORIDA 09 FEB 26 PM 1:52		
DOCUMENT # P01000015044 1. Corporation Name						
Superior Plumbing Services, Inc						
W09-9536						
	pal Office Address - No P.O. Box# 103rd Terr	3. Mailing Office Address 5648 103rd Terr N			REIN	ISTATEMENT 07-09
Suite, Apt. #, etc. Suite, Ap			ite, Apt. #, etc.		4. Date Incorp	orated or Qualified
City & Stat	te as Park	City & State Pinellas Park			5. FEI Numbe 59-37031	r Applied For
^{Zip} 33782	Country Zlp Pinellas 33782		Country Pinellas		G. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee reguli for a Certificate of Status	
	7. Name and Address of	f Current Regis	tered Agent			
Name Kristen Courtney					The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement	
Street Address (P.O. Box Number is Not Acceptable) 5648 103rd Terr N						
Suite, Apt. #, Etc.						
City Pinella	as Park	Stet		fee be waived.		
8. I, bein	ng appointed the registered agent of the abo	ove named corpo	oration, am famili	ar with and accept the o	bligations of section	
Registered Agent REGISTERED AGENT MUST SIGN						Date 02/26/2009
9. Name	es and Street Addresses of Each Officer an	d/or Director (Fid	orida nonprofit co	rporations must list at le	east 3 directors)	,
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director			City / State / Zip	
Р	Kristen Courtney	5648 103rd Terr N			Pinellas Park, FL 33782	
VP	Kevin Courtney	5648 103rd Ter			Pinellas Park, FL 33782	

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. 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: 🖆

Kristen Courtney

Kevin Courtney

KRISTEN COURTNEY

5648 103rd Terr N

5648 103rd Ter

SIGNATURE AND TYPED OR RRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pinellas Park, FL 33782

Pinellas Park, FL 33782

300144614193

Applied For Not Applicable iditional Fee required