

PS 182

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 NOV -3 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000025506

1. Corporation Name

Diamondback Tile & Stone, Inc.

300041937663
11/03/04--01027--018 **150.00

300041937663
10/18/04--01059--007 **158.75

2. Principal Office Address

13492 Las Brisas Way
Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 50668
Suite, Apt. #, etc.

City & State

Jacksonville, Florida

City & State

Jacksonville Bch, Fla.

Zip

32224

Country

US

Zip

32240

Country

U.S.

**4. Date Incorporated or Qualified
To Do Business in Florida**

March 04, 2002

5. FEI Number

04-3610192

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Danny R. Muir

Street Address (P.O. Box Number is Not Acceptable)

13492 LAS BRISAS WAY

Suite, Apt. #, Etc.

City

Jacksonville

State

FL

Zip Code

32224

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

[Signature]

Date

REGISTERED AGENT MUST SIGN

9. Names and Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Danny R. Muir	13492 LAS BRISAS WAY	Jacksonville, FL 32224

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 filing 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 under section 119.07(3)(i), 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)

04-3610192

PJ 292

Diamondback Tile & Stone, Inc.

P.O. Box 50668

Jacksonville Beach, Florida 32250

(904) 476-3086

September 14, 2004

To Whom It May Concern:

I am Danny R. Muir, sole incorporator of Diamondback Tile & Stone, Inc. At this time I would like to request a *Waiver of Reinstatement Fees*.

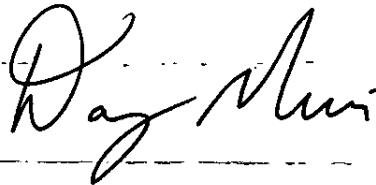
I have never received a renewal notice and the only thing I can contribute this to be the company moving to 13492 Las Brisas, Jacksonville, Florida 32224 in 2002 shortly after I became incorporated. The accountant that assisted Diamondback Tile & Stone to become incorporated never informed me that there was an annual renewal. I also have changed accountants during this time.

The dissolution of my company was brought to my attention recently by a contractor who I had bid work for.

I would appreciate your immediate attention and the approval of my request for *Waiver of Reinstatement Fees*. Now that I know this is an annual requirement I assure you it will never lapse again.

Attached is the Corporation Reinstatement form with the required normal fee of \$158.75.

Sincerely,



Danny R. Muir, President