PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT PO200069597 1. Corporation Name								O9 JUL - 1 AM 4: 25 SECRETARY OF STATE. TALLAHASSEE, FLORIDA				
Frank Ensminger Drywall Services, Inc.												
-					ing Office Address - 35th Ave. E			CR2E081 (12/08)				
Suite, Apt. #, etc. Suite, Apt. #,					etc.			4. Date Incorporated or Qualified To Do Business in Florida 06/24/2002				
City & State Palmetto, FL				Palmetto	City & State Palmetto, FL			5. FEI Numbe 45-04821				
Zip 34221			y	Zip 34221		Cour	ntry	6. CERTIFICATE	CERTIFICATE OF STATILIS DESIDED		tional Fee required tificate of Status	
		7. Na	me and Addres	s of Current Regi	stered Age	nt		_				
Name Frank Ensminger									☑ The reinstatement fee is imposed, except in			
Street Address (P.O. Box Number is Not Acceptable) 4714 - 35th Ave.,,East								circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not				
Suite, Apt. #, Etc.									received and requesting the reinstatement			
City Palmetto						State Zip Code FL 34221			waived.			
8. I, being	appointed the	register	ed agent of the	above named corp	oration, am	familiar	with and accept the o	obligations of sections	on 607.0505 or 617.0503, F	S.		
Signature o Registered			h L	REGISTERE		T SIGN			Date <u>6-</u> 2	5-	09	
A Names	and Street A	ddraaaa	of Each Office				pentions must list at l	anat 2 disastem)				
Titles	and Street A		Name of	<u> </u>	or Director (Florida nonprofit corporations must list at le Street Address of Each Officer and/or Directo				City / State / Zip			
CD	Ensming		4714 - 35th Ave. East				Palmetto, FL 34221					
D	Ensming		2416 - 16th Street West				Palmetto, FL 34221					
	R.	EII	NST/	TEM	EN	1		07/01	0 0158 021 /09010030	041 12 **	.3 ∗450.00	
				R	H							
	t				1						·	
this rei owed t on this	instatement apply the corporal application is	plication tion have	the reason for been paid and	dissolution has bee the names of indivi	n eliminate duals listed	d, the co	rporate name satisfie	s the requirements an exemption con er oath.	pter 607 or 617, F.S. I furth of section 607.0401 or 617 tained in Chapter 119, F.S.	7.0401, F.S The inform	i., that all fees	
SIGNA	IURE:	GNATUR	AND TYPED OF	BRINTED NAME OF	SIGNING	ERCE	P DIPECTOR	6	Dola D	Tautima Pho	no.#	