

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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DIVISION OF CORPORATIONS

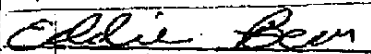
COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P02000098904			
1. Limited Liability Company's Name BEAN & SONS STUCCO, INC.			
2. Principal Office Address 1102 NORTH FEDERAL HWY Suite, Apt. #, etc. APT #4 City & State LAKE WORTH, FL Zip 33460		3. Mailing Office Address 1102 NORTH FEDERAL HWY Suite, Apt. #, etc. APT #4 City & State LAKE WORTH, FL Zip 33460	

REINSTATEMENT

0304

4. State/Country of Formation	
5. Date Organized or Qualified To Do Business in Florida 09/12/2002	
6. FEI Number	☒ 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 EDDIE BEAN	
Street Address (P.O. Box Number is Not Acceptable) 1102 NORTH FEDERAL HWY	
Suite, Apt. #, Etc. APT #4	
City LAKE WORTH	State FL
	Zip Code 33460

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.			
Signature of Registered Agent 		Date 10-5-04	
REGISTERED AGENT MUST SIGN			
10. Names and Street Addresses of Managing Members/Managers			
Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
DP	EDDIE BEAN	1102 NORTH FEDERAL HWY	LAKE WORTH, FL 33460
11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, 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 requirements of section 608.406, 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.			
Signature of Managing Member/Manager 		Date 10-5-04 Daytime Phone # 561-248-8201	
Typed or printed name of signing Managing Member/Manager EDDIE BEAN			

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10/26/04

**Florida Department of State
Division of Corporations
Public Access System**

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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800) 494-3124
Fax Number : (305) 675-2811

CORPORATION REINSTATEMENT

BEAN & SONS STUCCO, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$900.00