PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG 3n PM 12:10

DOCUMENT # P02000101209

1. Corporation Name: Lightning Construction Services Inc,

2. Principal Office Address	3. Mailing Office Address
5710 18 St. W.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Bradenton, FL	City & State: F
Zip: 34207 / Country: U.S.	Zip / Country

CR2E081 (12/05)

4. Date Incorporated or Qualified To Do Business in Florida: 9-2002

5. FEI Number: 65-1072627 ☐ 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: Stephanie Moore

Street Address (P.O. Box Number is Not Acceptable): 5710 18 St W

REINSTATEMENT 03-06

Suite, Apt. #, Etc.:

City: Bradenton | State: FL | Zip Code: 34207

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: S. Moore — Date: 7-30-06

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses 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
P,S,V.P Owner	Stephanie Moore	5710 18 St. W.	Bradenton, FL 34207
president / vice president			
treasurer			

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08/16/06--01048--007 **600.00

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 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: S. Moore — 7-30-06 — (941) 737-7612

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

M. Williams | JUL 3 « 20[illegible]

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To Whom it may concern, July 30, 2004

I recently met with my new accountant. She explained to me that I was no longer Inc. as of 2003. I did not realize I had to pay annual fees. I did not receive an annual report notice in 2003. I would you please consider waiving the reinstatement fee. I have enclosed a check for 600.00 to catch up x 4 years. Thank you so much for your consideration.

Document # P02000101209
Lightning Construction Services Inc.

Sincerely,
Stephanie Hlone
(941) 753-7012