## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORA REINSTATE	5 NEW 2 125 S	Secretar	TMENT OF STATE by of State CORPORATIONS		7 (1 F) 07 AUG - 7 PM 2: 26	
DOCUMENT # P03000025625  1. Corporation Name				CECHLIA II (1911 STATE TAELAMASSEE, FLORIDA		
PALM CITY FLOORING, INC					TATEMENT 05,07 5 01064 022-550	
2. Principal Office Ad 4225 SE 7	dress - № P.O. Box# 「AMARIND ST	3. Mailing Office Address 4225 SE TA	g Office Address SE TARMARIND ST		CR2E081 (1/07)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			porated or Qualified ness in Florida 03/04/2003	
City & State STUART, FL		City & State STUART, FL		5-5-1180081		
<sup>zip</sup> 34997	Country USA	<sup>Zip</sup> 34997	Country USA	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status		
7. Name and Address of Current Registered Agent						
Stripet Address (BCCCC) Spirite, Apt. #, Etc.	S & MILLER BNUT AVECeptable	2)	State . Zip Code		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 fee be waived.	
\$TUART			FL 34996			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the old Signature of Registered Agent REGISTERED AGENT MUST SIGN				Date 08/03/07		
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	
D SWI	SWITALSKI, BRIAN M 4225 SE TAMAR		SE TAMARIN	ND ST	PALM CITY,FL 34997	
					00108846786 /0701045002 **200.00	
				08/30	10108845785 /0701045003 **300.00	
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 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date  Daytime Phone #						

## SIMMONS AND MILLER

417 SE COCONUT AVE, SUITE 1

STUART, FL 34996

772-286-7005 & 772-283-3552

## August 3, 2007

Dear Michelle Milligan

I am writing you this letter regarding Palm City Flooring, Inc. Mr. Brian Switalski; reference number P03000025625. We are submitting the requirements to have his corporation reinstated per my phone conversation with Ms. Maketa.

Our Client never received the Annual report notice for 2005 or the letter of what corrections must be done to reinstate the corporation back in January 2006. I got this information from Maketa for the 850-245-6059 help line. Ms. Maketa stated that Mr. Switalski needs to submit \$300.00 along with the reinstatement form and Federal Tax 1d number in order to have the corporation reinstated.

Both of the items have been enclosed.

I am asking that you would considered waiving any late fees and penalties do to the fact that Mr. Switalski had not receive an notice of the 2005 annual report or the letter in January 2006 stating what corrections need to be completed.

Your assistance and consideration is greatly appreciated.

Sincerely,

Daniel Sprunger

Accountant

enclosures