

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2008 APR -7 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000082127

1. Limited Liability Company's Name

ENGINEERING CAD SERVICES, INC

REINSTATEMENT

CR2E041 (12/07)

05-08

2. Principal Office Address - No P.O. Box #

10150 Highland Manor Drive

Suite, Apt. #, etc.

Suite 200

City & State

Tampa

Zip

33610

Country

BROWARD

3. Mailing Office Address

10150 Highland Manor Drive

Suite, Apt. #, etc.

Suite 200

City & State

Tampa

Zip

33610

Country

BROWARD

4. State/Country of Formation

FL / BROWARD

5. Date Organized or Qualified
To Do Business in Florida

07 / 28 / 2003

6. FEI Number
200113785

☒ 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

RICHARD WELLS

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

10150 Highland Manor Drive

Suite, Apt. #, Etc.

Suite 200

City

TAMPA

State

FL

Zip Code

33610

☒ A \$100 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 \$100
reinstatement be waived.

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

Richard Wells

Date 04/02/2008

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
PRES	RONALD W FLEMING JR	848 Maple Ridge Dr	Boardman, Ohio 44512
TREAS	ROBERT STEVENS	132 EASTWING DRIVE	WARREN, OH, 44484
VP	ELLA PETKOVICH	904 BRENTWOOD POINTE	BRENTWOOD, TN, 37027

200122436952
04/07/08 01016 012 **600.00

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

Ronald W Fleming

Date 04/03/2008

Daytime Phone # 330-718-3047

Typed or printed name of signing Managing Member/Manager **RONALD W FLEMING**

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