PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

AMERICAN FRAMING & PRECAST, INC. 2. Principal Office Address - No P.O. Box # SINS NE 144H ST. Suite. Act. #, etc. SUITE 101 City & State City & State To Do Business or Fluidia Aug. 25, 2003 S. FRI Number South Act. #, etc. To Do Business or Fluidia Aug. 25, 2003 S. FRI Number To The STATE STATE STATE STATE STATE State Act Proceedings of Country To Name and Address of Current Registered Agent Name The reinstatement fee is imposed, except in circumstances which the entity do not receive the print notices. By checking this box, you are certifying the prior notices bey checking this box, you are certifying the prior notices were not received and requested and requesting the reinstatement fee be waived. So I being approach the registered agent of the above named corporation, and far-hear with and accept the doi: patients of section 607 5003 F.S. Segnature of Registered Agent MUST SIGN 8. Nummes and Siveet Addresses of Earn Officer and/or Director (Florida comprotit corporations must list at least 3 dericors) PERSON J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 TEMERSON J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA SUSAN CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA Emerson J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 VA Emerson J. CLAUSS TIL 3365 SE 15T AV. OCALA, FL 34471 The merson J. Clauss Til 3365 SE 15T AV. OCALA, FL 34471 VA Emerson J. Clauss Til 3365 SE 15T AV. OCALA, FL 34471 The merson J. Clauss Til 3365 SE 15T AV. OCALA, FL 34471 The merson J. Clauss Til 3365 SE 15T AV. OCALA, FL 34471 The merson J. Cla	CORPORATION REINSTATEMENT FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 09 OCT 20 PM 4: 14
2. Principal Office Address is No PO. Box # 3. Making Office Address Address Agency Ag	1. Corporation Name	SECKLIARY OF STATE TALLAHASSEE, FLORIDA
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Surta, Act. 4, Icc. SUITE 101 Cry & State To Do Business or Foordin ANG 25, 2003 S.F. FEI Number 5711 8573 S For Inchirate or Status Desared Micro Acquired For Micro Acquired For Acq	2. Principal Office Address - No P.O. Box # 3. Mailing Office Address	REINSTATEMENT 08-09
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20 COUNTY 3 4 470 County 3 4 470 County 5 20 County 6 CERTIFICATE OF STATUS DESIRED 1937 3 Additional for a country To a conditional of Strong The Centre Control of Strong 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. Suita Apt. #. Elc. Supposited Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Tables Officers and/or Directors FERENSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 TEMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA EMERSON J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA Emerson J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA Emerson J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 VA Emerson J. CLANSS TIL 33 65 SE 15T AV. OCALA, FL 34471 The transfer of the component of the componen	<u></u>	5. FEI Number Applied For
Name EMEXSON J. CLAUSS TPT Street Andress (P.O. Box Number is Not Acceptable) 3143 NE (1474 ST Suite Apt. #. Etc. 2147 Suite Apt. #. Etc. 2157 Suite Apt. #. Etc. 2167 Suite Apt. #. Etc. 216		6-
Street Address (P.O. Box Numbers in Not Acceptable) 3143 NE (1474 ST Suite Apt #, Etc. Suite Apt #, Etc. City OCRLA State Zip Code FL 344770 State Zip Code FL Zip Code		
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0503 F.S. Signature of Registered Agent Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Titles Name of Officers and/or Directors Steed Addresses of Each Officer and/or Directors Officer and/or Director Officer and/or Dir	EMERSON J. CUHUSS JM Street Address (P.O. Box Number is Not Acceptable) 3143 NE (4TH ST Suite. Apt. #. Etc. SUITE 10	 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
Signature of Registered Agent Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) 1 itles	l ´	300151931433 1879878 11115 1112 44300 75
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S EMERSON J. CLAUS III 3365 SE 1ST AV. OCALA, FL 34471 T EMERSON J. CLAUS III 3365 SE 1ST AV. OCALA, FL 34471 VA EMERSON J. CLAUS III 3365 SE 1ST AV. OCALA, FL 34471 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.	P EMERSON J. CLAUSS III 3365 SE 157 A	W. OCKLA, FL 3447/
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylime Phone #		

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