## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS					FILED 10 JUN-7 AM 10: 42				
DOCUMENT # P04000102534  1. Corporation Name											ECPE DARY OF ST ELAHASSEE, FLO	RIDA	
Wood 4 U Installation, Inc.											8-20- 25-25.		
2. Principal Office Address - No P.O Box #					3. Mailing Office Address Same					06.70710-01.066-008 <sup>-2</sup> **450.100			
1116 NE Banyan Tree Drive Suite, Apt. #, etc.					Suite, Apt. #, etc.					REINSTATEMENT 1/09)08710			
										Date Incorporated or Qualified     To Do Business in Florida 07/07/2004			
City & State Jensen Beach, Florida					Same					5. FEI Number Applied For 760763985 Not Applied by Applied For			
Zip 34957	Country U.S.			Z <sub>IP</sub>		Countr	-		6. CERTIFICATE OF STATUS DESIRED 58		8.75 Additional Fe	e required	
04007			· · · · · · · · ·	dress o	1	<del> </del>						TOTA GOTTINGAGE O	Status
7. Name and Address of Current Registered Agent  Name Frederick E. Randle  Street Address (P.O. Box Number is Not Acceptable) 1116 NE Banyan Tree Drive  Suite, Apt. #, Etc.  City Jensen Beach  State Zip Code 34957									2	<ul> <li>☑ 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.</li> </ul>			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the of Signature of Registered Agent  REGISTERED AGENT MUST SIGN										bligations of section 607.0505 or 617.0503, F.S.  Date March, 2, 2010			
9 Names	and Street A	ddresses	of Each Off	ficer and	d/or Director (Flo	rida nonpro	ifit corpor	rations must lis	st at lea	ast 3 directors)			
Titles	Name of Officers and/or Directors				Street Address of Ea Officer and/or Direct					City / St	tate / Zip		
Р	Frederick E. Randle					1116 NE Banyan Tr			ı Tre	ee Drive	Jensen Bead	ch, FI, 34	957
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10. E-mail Address: frederickrandle@bellsouth.net  (To be used for future annual report notification)													
11. 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. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.  Frederick E. Randle  March 2, 2010 772 215-2366													
SIGNAT	.UKE:	-	SIGNATUE	E AND T	VDED OR DRINTI			OFFICER OR D			Date Date	Daytime Ph	1