## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT # P04000122854 FILED 1. Entity Name ROCK HARD CONSTRUCTION INC. 2006 JUL 17 PM 2: 18 CHUHANU NE Principal Place of Business Mailing Address 3801 MISSION TRACE BLVD #L5 3801 MISSION TRACE BLVD #L5 TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32303 2. Principal Place of Business 3701 Dorset 3. Mailing Address 370 1 Oorset Way Suite, Apt. #, etc. Suite, Apt. #, etc. 07172006 REIN-P CR2E098 (11/05) City & State City & State 4. FEI Number Applied For FL 0(05 iallahassee Not Applicable \$8.75 Additional 5. Certificate of Status Desired Leon LON Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GRENAT, JOE Street Address (P.O. Box Number is Not Acceptable) 3801 MISSION TRACE BLVD #L5 TALLAHASSEE, FL 32303 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE\_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$300.00 corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11/ secretary lint Rosenberger CEO TITLE ☐ Defete TIT! F □ Change Addition GRENAT, JOE NAME NAME 3701 Oorset Way Tallahassee fl 32303 3701 Dorset STREET ADDRESS 3801 MISSION TRACE BLVD #L5 STREET ADDRESS TALLAHASSEE, FL 32303 CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE Treasurer Change Addition Diallo Gaymon 3701 Dorset Way ROSNEBERGER, ROBERT NAME NAME STREET ADDRESS 2254 TUSCAVILLA RD STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32312 CITY-ST-ZIP Tollahassel FL. 32303 TITLE Delete TITLE ☐ Change ■ Addition NAME SNYDER, JEFF NAME 500077611125 4354 DAVID CT STREET ADDRESS STREET ADDRESS 07/17/06--01013--012 \*\*485**.**00 CITY-ST-ZIP TALLAHASSEE, FL 32309 CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition NAME SMITH, CHRIS NAME 366 HAYDEN STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32304 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: