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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

08 APR 10 PM 1:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 004000150787

1. Corporation Name

Rockhound Contractor, Inc.

REINSTATEMENT 07-08

2. Principal Office Address 271 NW 177 ST Suite, Apt. #, etc. #224 City & State Miami FL Zip 33167 Country USA		3. Mailing Office Address " " Suite, Apt. #, etc. " " City & State " " Zip " Country "		4. Date Incorporated or Qualified To Do Business in Florida 11/03/04
		5. FEI Number 20-1828436		Applied For ☐ Not Application
6. CERTIFICATE OF STATUS DESIRED ☐				

7. Name and Address of Current Registered Agent Name Juan L. Olascoaga Street Address (P.O. Box Number is Not Acceptable) 271 NW 177 ST Suite, Apt. #, Etc. #224 City Miami State FL Zip Code 33169	
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8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent [Signature] Date 4/7/08 REGISTERED AGENT MUST SIGN	
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9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Juan L. Olascoaga	271 NW 177 ST #224	Miami FL 33169

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04/10/08 01008 024 ***000.00

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 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 under section 119.07(3)(b), 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] DATE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 4/7/08 Daytime Phone	
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24/10

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ROCKHOUND CONTRACTOR INC
271 NW 177 ST #224
MIAMI, FL 33167
305.323.6838

April 07, 2008

Florida Department of State
Division of Corporations

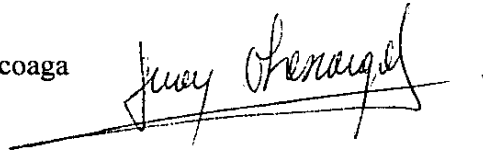
Re: **ROCKHOUND CONTRACTOR INC**
P04000150787

To Whom It May Concern,

As per my telephone conversation with your office, with this letter I am asking for the penalty to be waived and to reactivate my corporation since I didn't receive any notification in 2007. Any questions please don't hesitate to contact me.

Sincerely,

Juan Olascoaga
President

A handwritten signature in black ink, appearing to read "Juan Olascoaga", is written over a horizontal line.