PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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	RPORAT STATEM	海勒尼亞語 1.4 16) s	DEPAR Secretar	y of S		Ē		FILED		
DOCUMENT # P05000134535								10 FEB - 3 PM 2: 55			
1. Corporation Name								SECRETARY OF STATE TALLAHASSEE, FLOOPER			
Rudd	l Grade	e, Inc									108-
<u> </u>								REI	ISTATE V	*\5 *	· · ·
Principal Office Address - No P.O. Box # 3. Mailing O 857 SW College Park Road 857 SW				office Address College Park Road				01-29-10 01027 014 \$900.00. CR2E081 (11/09)			
Suite, Apt. #, etc. Suite, Apt. #				etc.				4. Date Incorporated or Qualified			
City & State City & State								To Do Business in Florida 09/30/2005			
Port Saint Lucie, FL Port				aint Lucie, FL			[5. FEI Number Applied For 043828890 Not Applicable			
^{Zip} 34953		Country	^{Ζiρ} 34953		USA	•		6. CERTIFICATE		5 Additional Fee r a Certificate of	
		7. Name and Address of	of Current Regis	tered Age	nt						
Name David B. Rudd								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.			
Street Address (P.O. Box Number is Not Acceptable)											
857 SW College Park Road Suite, Apt. #, Etc.											
City					State Zip Code						
Port Saint Lucie					FL	34953		<u> </u>			
		e registered agent of the ab	ove named corpo	ration #m	familiar //	with and accept t	the ob	ligations of section	n 607.0505 or 617.0503, F.S.		
Signature of Registered Agent REGISTERED AGENT MUST SIGN								Date 02/02/2010			
9. Names	s and Street A					orations must list	t at lea	st 3 directors)			
Titles	s and Street Addresses of Each Officer and/or Director (Flo Name of Officers and/or Directors			Street Address of Each Officer and/or Director				,	City / Stat	e / Zip	
Р	David B. Rudd							k Road Port Saint Lucie, FL 349		 1953	
	Dav.	<u> </u>		-			-		- Ort Gaint Edo		
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10. E-mail Address: lindacmd@aol.com

(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.

SIGNATURE:

David B. Rudd, President

02/02/2010 (772) 4082487

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Feb.2,2010

I, David B. Rudd, voluntarily filed Articles of Dissolution for RUDD-GRADE INC. with Document # P10000007371 as filed with Florida Dept. of State Division of Corporations. Therefore, I authorize that RUDD GRADE, INC. with Document # P05000134535 if reinstated, can use the name for It's corporation.

David B. Rudd, President