PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SEGNETARY OF STATE DIVISION OF CORPORATIONS

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REINSTATEMEN	lΤ



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P10000012398

1. Corporation Name

D & D Fence Installation, Inc.

2. Principal Office Address - No P.O. Box # 3. Mailing Office Address 1810 Lakeview Drive l1810 Lakeview Drive CR2E081 (11/10) Date Incorporated or Qualified To Do Business in Florida City & State February 9, 2010 5. FEI Number Applied For Brandon, FL Brandon, FL Not Applicable 27-1863613 \$8.75 Additional Fee required for a Certificate of Status CERTIFICATE OF STATUS DESIRED B3511-6224\USA 33511-6224 IUSA 7. Name and Address of Current Registered Agent Ken Arena, P.A. dba Ken Arena Accounting & Tax Service 300244661433 03/04/13--01049--021 **150.00 Street Address (P.O. Box Number is Not Acceptable) 912 Lithia Pinecrest Road Suite, Apt. #, Etc. 3**00244661433** 02/12/13--01023--023 **750.00 Brandon, FL 33511-6121 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. Registered Agent Name of Street Address of Each Titles City / State / Zip Officers and/or Directors Brandon, FL 33511-6224 Dennis T. Davis P/S/T 1810 Lakeview Drive Brandon, FL 33511-6224 VP Dorie Davis 1810 Lakeview Drive REINSTATEMENT MAR 0 4 2013 R. HUNT

10. E-mail Address: patty@kenarenatax.com

(To be used for future annual report notification)

3 T. DAVIS PRESIDENT SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICE DIRECTOR

^{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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is not accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of