	PLEASE REA	AD ALL INST	RUCT	IONS	BEFORE C	OMPLETI	ING THIS FC	RM.	
	PLICATION FOR STATEMENT		DEPAR Glenda Secreta //SION OF	E. Ho	tate			HĽĔD	
DOCUMENT # P9600029083  1. Corporation Name  LEE MILLER LANDSCAPE, INC.						03 OCT 13 PM 2:38  SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Planting 166 NORTH VENICE FLAT	ace of Business HAVANA ROAD 14292	Mailing Addre	Mailing Address  166 NORTH HAVANA ROAD VENICE FL 34292  Dough incorrect information and enter co						
Suite, Apt.	ncipal Office Address, If Applicable  #, etc.  BELLIN 1 Crecle  DMIS FL.	3. New Mailir Suite Apt. #, 186 City & State	3. New Mailing Office Address, If A Suite Apt. #, etc.			4. Date Incorporated or Qualified To Do Business in Florida  5. FEI Number  65-0666098  Applied For Not Applicable  6. \$8.75 Additional Fee requires			
Zip 3 \ Z 7. Names a Title(s)	nd Street Addresses of Each Officer  Name of Officer and/or Directors	and/or Director (Flor		fit corporal Stre	5	st 3 directors)	OF STATUS DESIRED L	for a C	Certificate of Status
D	MILLER, LEE		166 NORTH HAVANA ROAD				VENICE FL 34292		
						30) 10/13/	002375 03-01088-0	0193 19 **1	3 50.00
8. Name and Address of Current Registered Agent TOWERY, JERREL É					Name Jerre	JE.	Address of New Regis  Towery is Not Acceptable)	stered Agent	t_
333 SO. TAMIAMI TRAIL VENICE FL 34285				Suite, Apt. #, Etc. Suite Apt. #, Etc. Suite Apt.		s Not Acceptance)		Code	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date 10-9-03

11. I certify that I m 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)(i), 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 AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-8-03 (941)966-6995

Daytime Phone #

## LEE MILLER LANDSCAPE INC. 486 Bellini Circle (941) 966-6995 Nokomis Florida 34275

To whom it may concern.

After receiving my corporate revocation letter on October 8, 2003. I called and spoke with a representative who directed me to write this letter of explanation and to send my-original 150.00\$ payment.

I never received my application this year do to relocation. I did send in my new location address as evidence that this Revocation did arrive here but the document inside still states my old address.

Please correct this as well as the new address for the registered agent Jerrel E. Towery, who also has relocated this past year. Thank you for understanding in this matter and if you have any questions please call 941-966-6995.

Thank you,

Lee C. Miller

Tax ID# 65-0666098