

STATE OF GEORGIA
Secretary of State
Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF REINSTATEMENT

I, **Brian P. Kemp**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

BLACKWELL & SON, LLC
a Domestic Limited Liability Company

was formed on 06/18/2004, and later administratively dissolved on 08/24/2017. Said entity has filed an application for reinstatement and has paid all fees and penalties due to the Secretary of State. Attached hereto is a true and correct copy of said application.

WHEREFORE, said entity is hereby reinstated as of 10/02/2017, having met the requirements for reinstatement under Title 14 of the Official Code of Georgia Annotated. The reinstatement shall relate back to and take effect as of the date of the administrative dissolution and the entity may resume its business as if the administrative dissolution had never occurred.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on **10/18/2017**.




Brian P. Kemp
Secretary of State

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Application for Reinstatement

Electronically Filed

Secretary of State

Filing Date: 10/2/2017 10:48:07 AM

BUSINESS INFORMATION

BUSINESS NAME : BLACKWELL & SON, LLC
CONTROL NUMBER : 0439499
BUSINESS TYPE : Domestic Limited Liability Company
ADMINISTRATIVE DISSOLUTION DATE : 08/24/2017

Ground(s) for the administrative dissolution either did not exist or have been eliminated. All taxes owed by the entity have been paid.

ADDRESS AND REGISTERED AGENT AT TIME OF ADMINISTRATIVE DISSOLUTION

PRINCIPAL OFFICE ADDRESS : 3023 BRADSHAW CLUB DR., WOODSTOCK, GA, 30188, USA
REGISTERED AGENT NAME :
AGENT ADDRESS : NONE

CURRENT ADDRESS AND REGISTERED AGENT

PRINCIPAL OFFICE ADDRESS : 110 Little River Dr, WOODSTOCK, GA, 30188, USA
REGISTERED AGENT NAME : COLLEEN BLACKWELL
AGENT ADDRESS : 3023 BRADSHAW CLUB DRIVE, Cherokee, WOODSTOCK, GA, 30188, USA

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE : Scotty Blackwell
AUTHORIZER TITLE : Manager

Reinstatement-LLC

I, Scotty Blackwell, certify that I was a manager of a member of Blackwell & Son LLC,
At the time it was administratively dissolved.

I have knowledge of and do hereby assent to the application for reinstatement.

Scotty Blackwell

State of Georgia, County of Cherokee
Sworn to (or affirmed) and subscribed before me this 12 day of October 2017
by Scotty Blackwell (name of person making statement)
Personally Known Type and # of ID DL - Drivers Lic. Produced Identification
Brenda L. Thomas (Signature of Notary)
Brenda L. Thomas (Name of Notary Typed, Stamped, or Printed)
Notary Public, State of Georgia

