2004 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED **DOCUMENT # L03000046937** 1. Entity Name 2004 NOV 18 PM 2: LI BELLAGAMBA TILE, LLC SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1212 55TH AVE DRIVE EAST 1212 55TH AVE DRIVE EAST BRADENTON, FL 34203 BRADENTON, FL 34203 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 11092004 **REIN-LLC** CR2E101 (6/04) City & State City & State 4. FEI Number 200395742 Applied For Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GAY, JIM CPA 3984 MANATEE AVE EAST BRADENTON, FL 34208 8. The above named enjity submits this statement for the purgose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of reg SIGNATURE FILE NOW!!! FEE IS \$150.00 Make check payable to After January 1, 2005, Fee will be \$200.00 Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGRM TITLE ☐ Delete TITLE ☐ Change ☐ Addition BELLAGAMBA, STEVE NAME NAME STREET ADDRESS 1212 55TH AVE DRIVE EAST STREET ADDRESS CITY-ST-7IP BRADENTON, FL 34208 CITY-ST-ZIP TITLE De!ete TITLE ☐ Change ☐ Addition NAME NAME 800042866648 11/18/04--01038--003 **150.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TIRE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE De!ete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes. (qui) Stewn J