

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000055253

**FILED**  
**Jul 27, 2011**  
**Secretary of State**

**Entity Name:** A-1 PROFESSIONAL ASPHALT LLC

**Current Principal Place of Business:**

590 3RD ST SW  
NAPLES, FL 34117

**New Principal Place of Business:**

820 100TH AVENUE N.  
NAPLES, FL 34108

**Current Mailing Address:**

PO BOX 368295  
BONITA SPRINGS, FL 34136

**New Mailing Address:**

**FEI Number:** 56-2428206

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

QUIRIN, THOMAS M OWNER  
590 3RD ST. S.W.  
NAPLES, FL 34117 US

**Name and Address of New Registered Agent:**

QUIRIN, THOMAS M OWNER  
820 100TH AVENUE N.  
NAPLES, FL 34108 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: THOMAS M. QUIRIN

07/27/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: QUIRIN, THOMAS M  
Address: PO BOX 368295  
City-St-Zip: BONITA SPRINGS, FL 34136 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: THOMAS M. QUIRIN, MANAGER

MGR.

07/27/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date