

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000029336

FILED
Jan 25, 2007
Secretary of State

Entity Name: CLAUDE PARKER DRYWALL LLC

Current Principal Place of Business:

9763 FOWLER AVE
PENS, FL 32534

New Principal Place of Business:

Current Mailing Address:

9763 FOWLER AVE
PENS, FL 32534

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PARKER, CLAUDE
9763 FOWLER AVE
PENS, FL 32534 US

Name and Address of New Registered Agent:

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: CLAUDE PARKER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PARKER, CLAUDE
Address: 9763 FOWLER AVE
City-St-Zip: PENS, FL 32534

Title: MGRM () Delete
Name: PARKER, CLAUDE
Address: 9763 FOWLER AVE
City-St-Zip: PENS, FL 32534

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: CLAUDE PARKER

MGRM

01/25/2007

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