2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000046318

Entity Name: HIGH TIDE CUSTOM TRIM, LLC

2060 E. HATTON STREET

PENSACOLA, FL 32503 US

Address:

City-St-Zip:

FILED Dec 07, 2009 Secretary of State

Current Pr	incipal Place of Business:	New Princi	pal Place of Business:	
	TTON STREET LA, FL 32503 US			
Current Mailing Address:		New Mailin	New Mailing Address:	
	TTON STREET LA, FL 32503 US			
FEI Number: 20-8952910 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: Name and Address of New Registered Agent:				
WALL, WILLIAM G 2060 E. HATTON STREET PENSACOLA, FL 32503 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.				
SIGNATUR	E: WILLIAM G. WALL			
	Electronic Signature of Registered Agent		Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/C	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete WALL, WILLIAM G 2060 E. HATTON STREET PENSACOLA, LF 32503 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete BROCK, GREG 2060 E. HATTON STREET PENSACOLA, FL 32503 US	Title: Name: Address: City-St-Zip:	MGRM (X) Change () Addition MIELCZARSKI, MIKE 2060 E. HATTON STREET PENSACOLA, FL 32503 US	
Title: Name: Address: City-St-Zip:	MGRM () Delete RICHEY, JOHNNY 2060 E. HATTON STREET PENSACOLA, FL 32503 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () Delete TRUESDALE, STEVE	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: WILLIAM G WALL MGR 12/07/2009