

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000069436

Entity Name: GULF COAST INSULATION, LLC

Current Principal Place of Business:

63 SOUTH STAGECOACH ROAD
DEFUNIAK SPRINGS, FL 34235

Current Mailing Address:

63 SOUTH STAGECOACH ROAD
DEFUNIAK SPRINGS, FL 34235

FEI Number: 90-0503310

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LAGROSSE, ERIN EMS.
63 S STAGECOACH
DEFUNIAK SPRINGS, FL 32435 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name LAGROSSE, JON
Address 63 SOUTH STAGECOACH ROAD
City-State-Zip: DEFUNIAK SPRINGS FL 34235

Title MGRM
Name ANDERSON, COLBY
Address 513 COUNTRY CLUB DR
City-State-Zip: DEFUNIAK SPRINGS FL 32435

Title MGRM
Name LAGROSSE, ERIN
Address 63 SOUTH STAGECOACH ROAD
City-State-Zip: DEFUNIAK SPRINGS FL 34235

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ERIN LAGROSSE

MANAGING MEMBER

01/08/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date