

**2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L16000063955

**Entity Name:** ASSURED INSTALLATION PROS, LLC

**Current Principal Place of Business:**

701 PROMENADE DR  
SUITE 202  
PEMBROKE PINES, FL 33026

**Current Mailing Address:**

701 PROMENADE DR  
SUITE 202  
PEMBROKE PINES, FL 33026 US

**FEI Number:** 81-1981443

**Certificate of Status Desired:** No

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

ROBERTSON, TYRONE G  
701 PROMENADE DR  
SUITE 202  
PEMBROKE PINES, FL 33026 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:** TYRONE ROBERTSON

10/17/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AP
Name	ROBERTSON, TYRONE G	Name	PITTER, DAVE
Address	701 PROMENADE DR, SUITE 202	Address	701 PROMENADE DR, SUITE 202
City-State-Zip:	PEMBROKE PINES FL 33026	City-State-Zip:	PEMBROKE PINES FL 33026

*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:** TYRONE ROBERTSON

MANAGER

10/17/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date