

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000002580

Entity Name: TD ENGINEERING, LLC

FILED
Feb 21, 2007
Secretary of State

Current Principal Place of Business:

5965 N.W. 82ND AVENUE
MIAMI, FL 33166

New Principal Place of Business:

3720 GRANADA BLVD
CORAL GABLES, FL 33134

Current Mailing Address:

5965 N.W. 82ND AVENUE
MIAMI, FL 33166

New Mailing Address:

3720 GRANADA BLVD
CORAL GABLES, FL 33134

FEI Number: 65-0834142 FEI Number Applied For () FEI Number Not Applicable () 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:

KTG&S REGISTERED AGENT CORPORATION
100 S.E. 2ND STREET, 28TH FLOOR
MIAMI, FL 33131 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: THOMAS O. WELLS, ESQ.

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: DANIEL, TOM
Address: 5965 N.W. 82ND AVENUE
City-St-Zip: MIAMI, FL 33166

Title: VS (X) Delete
Name: DANIEL, SHELLEY
Address: 5965 NW 82 AVE.
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES:

Title: VS (X) Change () Addition
Name: DANIEL, SHELLEY
Address: 3720 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33134

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: SHELLEY DANIEL

VS

02/21/2007

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