

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000004023

Entity Name: IMAGE BUILDERS, LLC

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

778 JIMMY ANN DRIVE
APT 904
DAYTONA BEACH, FL 32114

Current Mailing Address:

C/O YVONNE R. GATHERS
P. O. BOX 2741
DAYTONA BEACH, FL 32114

New Principal Place of Business:

1500 CROWNE ORMOND LANE
APT 412
ORMOND BEACH, FL 32174

New Mailing Address:

1500 CROWNE ORMOND LANE
APT 412
ORMOND BEACH, FL 32174

FEI Number: 59-3637940 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:

GATHERS, YVONNE R
778 JIMMY ANN DRIVE
APT. 904
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

GATHERS, YVONNE R
1500 CROWNE ORMOND LANE
APT. 412
ORMOND BEACH, FL 32174 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: YVONNE R. GATHERS

04/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GATHERS, YVONNE
Address: 778 JIMMY ANN DRIVE APT 904
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GATHERS, YVONNE
Address: 1500 CROWNE ORMOND LANE APT. 412
City-St-Zip: ORMOND BEACH, FL 32174

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.

SIGNATURE: YVONNE R. GATHERS

MGRM

04/08/2009

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