

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000000632

**FILED**  
**Oct 02, 2007**  
**Secretary of State**

**Entity Name:** METROPOLITAN CONSTRUCTION MANAGEMENT LLC

**Current Principal Place of Business:**

321 SOUTH DILLARD STREET  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

321 SOTH DILLARD STREET  
WINTER GARDEN, FL 34787

**New Mailing Address:**

321 SOUTH DILLARD STREET  
WINTER GARDEN, FL 34787

**FEI Number:** 59-3701848      **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:**

ROPER, CHRIS  
13037 LAKE ROPER COURT  
WINDERMERE, FL 34786      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: CHRIS ROPER

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: ROPER, CHRIS  
Address: 13037 LAKE ROPER CT.  
City-St-Zip: WINDERMERE, FL 34786

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHRIS ROPER

MGR

10/02/2007

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