

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000015947

Entity Name: J.J.'S TREE SERVICE, LLC

FILED
Oct 27, 2004
Secretary of State

Current Principal Place of Business:

150 JEFFIE TUCKER RD.
EASTPOINT, FL 32328

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 163
EASTPOINT, FL 32328

New Mailing Address:

FEI Number: 59-3744828 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:

Name and Address of New Registered Agent:

GOLDEN, JOHN H
150 JEFFIE TUCKER ROAD
EASTPOINT, FL 32328 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

MANAGING MEMBERS/MEMBERS:

Title: P () Delete
Name: GOLDEN, JOHN H
Address: 150 JEFFIE TUCKER RD.
City-St-Zip: EASTPOINT, FL 32328

Title: V () Delete
Name: GOLDEN, JACQUELINE H
Address: 150 JEFFIE TUCKER RD.
City-St-Zip: EASTPOINT, FL 32328

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GOLDEN, JOHN H
Address: 150 JEFFIE TUCKER RD.
City-St-Zip: EASTPOINT, FL 32328

Title: MGRM (X) Change () Addition
Name: GOLDEN, JACQUELINE H
Address: 150 JEFFIE TUCKER RD.
City-St-Zip: EASTPOINT, FL 32328

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN H. GOLDEN

MGRM

10/27/2004

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