

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L01000019650

**FILED**  
**Sep 26, 2011**  
**Secretary of State**

**Entity Name:** DAVIS & SONS CONSTRUCTION SERVICES, LLC

**Current Principal Place of Business:**

100 EMERALD ISLE ROAD  
SUITE A  
HAINES CITY, FL 33884

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 750  
HAINES CITY, FL 33845

**New Mailing Address:**

PO BOX 750  
HAINES CITY, FL 33845 US

**FEI Number:** 27-1057086

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DAVIS, DARLEEN L  
100 EMERALD ISLE ROAD  
SUITE A  
HAINES CITY, FL 33884 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:** DARLEEN L. DAVIS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** PRES  
**Name:** DAVIS, DARLEEN L  
**Address:** 100 EMERALD ISLE ROAD - SUITE A  
**City-St-Zip:** HAINES CITY, FL 33844

**Title:** MGRM  
**Name:** DAVIS, NICHER  
**Address:** 100 EMERALD ISLE ROAD - SUITE A  
**City-St-Zip:** HAINES CITY, FL 33844 US

I hereby 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:** DARLEEN DAVIS

PRES

09/26/2011

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