

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000020271

FILED
Dec 13, 2004
Secretary of State

Entity Name: TIM WILLIAMS BUILDERS, LLC

Current Principal Place of Business:

3975 GLASSMAN RD
ST. CLOUD, FL 34772 US

New Principal Place of Business:

Current Mailing Address:

3975 GLASSMAN RD
ST. CLOUD, FL 34772 US

New Mailing Address:

FEI Number: 11-3646542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMINSKEY, JASON
2916 CANOE CIRCLE
ST. CLOUD, FL 34772 US

Name and Address of New Registered Agent:

WILLIAMS, TIM
3975 GLASSMAN ROAD
ST. CLOUD, FL 34772 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: TIM WILLIAMS

12/13/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: COMINSKEY, JASON
Address: 2916 CANOE CIRCLE
City-St-Zip: ST. CLOUD, FL 34772 US

Title: MGRM () Delete
Name: WILLIAMS, TIM
Address: 3975 GLASSMAN RD
City-St-Zip: ST. CLOUD, FL 34772 US

ADDITIONS/CHANGES:

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

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 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: TIM WILLIAMS

MGRM

12/13/2004

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