

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000008324

**FILED**  
**Oct 11, 2006**  
**Secretary of State**

**Entity Name:** HARTSFIELD ELECTRIC SERVICES, LLC

**Current Principal Place of Business:**

1017 CAPITAL CIRCLE NW  
TALLAHASSEE, FL 32304

**New Principal Place of Business:**

4864- B CORLETT STREET  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

1017 CAPITAL CIRCLE NW  
TALLAHASSEE, FL 32304

**New Mailing Address:**

4864-B CORLETT STREET  
TALLAHASSEE, FL 32303

**FEI Number:** 72-1556199      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

HINES, JAMES P  
315 S. HYDE PARK AVENUE  
TAMPA, FL 33606      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:** DIANE HARTSFIELD

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR      ( ) Delete  
**Name:** HARTSFIELD, RONALD L  
**Address:** 7836 CHRISTY CARY LN  
**City-St-Zip:** TALLAHASSEE, FL 32304

**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 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:** RONALD L. HARTSFIELD

MGR

10/11/2006

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