

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000028202

FILED
Oct 11, 2004
Secretary of State

Entity Name: M & S, LLC

Current Principal Place of Business:

4104 W. LINEBAUGH AVENUE
TAMPA, FL 33624

New Principal Place of Business:

4014 GUNN HWY
250
TAMPA, FL 33618

Current Mailing Address:

4104 W. LINEBAUGH AVENUE
TAMPA, FL 33624

New Mailing Address:

4014 GUNN HWY
250
TAMPA, FL 33618

FEI Number: 20-0196577 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:

JOHNSON, LEONARD H
37837 MERIDIAN AVENUE
SUITE 314
DADE CITY, FL 33525 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: TRINITY HOME BUILDER, S, INC.
Address: 750 NORTHLAWN DRIVE
City-St-Zip: COLUMBUS, OH 43214

Title: MGRM () Delete
Name: MOBLEY, TIMOTHY F
Address: 4104 W. LINEBAUGH AVENUE
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: MOBLEY, TIMOTHY F
Address: 4014 GUNN HWY 250
City-St-Zip: TAMPA, FL 33624

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: TIMOTHY F MOBLEY

MGRM

10/11/2004

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