

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000044377

**FILED**  
**Sep 20, 2011**  
**Secretary of State**

**Entity Name:** DAVE LONG/CARPENTER LLC

**Current Principal Place of Business:**

9545 MENDEL DR.  
NEW PORT RICHEY, FL 34654 US

**New Principal Place of Business:**

**Current Mailing Address:**

9545 MENDEL DR.  
NEW PORT RICHEY, FL 34654 US

**New Mailing Address:**

**FEI Number:** 11-3665795

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LONG, CAROLYN M  
9545 MENDEL DR.  
NEW PORT RICHEY, FL 34654 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:** CAROLYN M LONG

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LONG, DAVID C  
**Address:** 9545 MENDEL DR.  
**City-St-Zip:** NEW PORT RICHEY, FL 34654 US

**Title:** MGRM  
**Name:** LONG, BRENT  
**Address:** 4125 CLAREMONT DR  
**City-St-Zip:** NEW PORT RICHEY, FL 34652 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:** DAVID C LONG

MGRM

09/20/2011

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