

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000046046

**FILED**  
**Sep 30, 2013**  
**Secretary of State**

**Entity Name:** BRUCE ANDREWS PLUMBING, LLC

**Current Principal Place of Business:**

4010 NW GAINESVILLE RD.  
OCALA, FL 34475

**New Principal Place of Business:**

**Current Mailing Address:**

4010 NW GAINESVILLE RD.  
OCALA, FL 34475

**New Mailing Address:**

**FEI Number:** 59-2902498

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANDREWS, BRUCE R  
4010 NW GAINESVILLE RD.  
OCALA, FL 34475 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:** BRUCE ANDREWS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** ANDREWS, BRUCE R  
**Address:** 4010 NW GAINESVILLE RD.  
**City-St-Zip:** OCALA, FL 34475

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:** BRUCE ANDREWS

OWN

09/30/2013

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