2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000047915

Entity Name: OLEGARIO SANCHEZ CARPENTRY LLC

FILED Sep 22, 2006 Secretary of State

Titley Ita		
Current P	rincipal Place of Business:	New Principal Place of Business:
196 WILD QUINCY, I	TURKEY LANE FL 32351	
Current N	lailing Address:	New Mailing Address:
196 WILD QUINCY, I	TURKEY LANE FL 32351	
	: 20-0458313 FEI Number Applied For () ace with s. 607.193(2)(b), F.S., the limited liability	FEI Number Not Applicable () Certificate of Status Desired () company did not receive the prior notice.
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
JOHNSON, BARBARA A 373 E JEFFERSON ST QUINCY, FL 32351 US		SANCHEZ, SHAWNA E 196 WILD TURKEY LANE QUINCY, FL 32351 US
	e named entity submits this statement for the of Florida.	e purpose of changing its registered office or registered agent, or both
SIGNATU	JRKEY LANE 32351 JING Address: JRKEY LANE 32351 JO-0458313 FEI Number Applied For () FEI with s. 607.193(2)(b), F.S., the limited liability company of ddress of Current Registered Agent: BARBARA A BRSON ST 32351 US Amed entity submits this statement for the purpose of Florida. ESHAWNA E. SANCHEZ Electronic Signature of Registered Agent MBERS/MANAGERS: MGR () Delete BANCHEZ, OLEGARIO 196 WILD TURKEY ROAD 20UNCY, FL 32351 MGRM () Delete BALAZAT, SERGIO 335 STRONG RD., #49	09/22/2006
	Electronic Signature of Registered	Agent Date
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/CHANGES:
Title: Name: Address: City-St-Zip:	MGR () Delete SANCHEZ, OLEGARIO 196 WILD TURKEY ROAD QUINCY, FL 32351	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	MGRM () Delete SALAZAT, SERGIO 635 STRONG RD., #49 QUINCY, FL 32351	Title: MGRM (X) Change () Addition Name: SANCHEZ, FELIPE S Address: 196 WILD TURKEY LANE City-St-Zip: QUINCY, FL 32351
Title: Name: Address: City-St-Zip:	() Delete	Title: MGRM () Change (X) Addition Name: HERNANDEZ, JOSE M Address: 196 WILD TURKEY LANE City-St-Zip: QUINCY, FL 32351

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: SHAWNA E. SANCHEZ RA 09/22/2006