

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED
Feb 21, 2008
Secretary of State**

DOCUMENT# L03000050990

Entity Name: PANHANDLE HOME SERVICE AND REPAIR LLC

Current Principal Place of Business:

3831 HWY. 77
CHIPLEY, FL 32428

New Principal Place of Business:

3831 HWY 77
CHIPLEY, FL 32428

Current Mailing Address:

2842 RIVER RD
VERNON, FL 32462

New Mailing Address:

FEI Number: 59-3558671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

SMALL, ROBERT E
2842 RIVER RD
VERNON, FL 32462 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: ROBERT E SMALL

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SMALL, ROBERT E
Address: 2842 RIVER RD
City-St-Zip: VERNON, FL 32462

Title: MGRM () Delete
Name: SMALL, RONALD J JR
Address: 3835 HWY 77
City-St-Zip: CHIPLEY, FL 32428

Title: MGRM () Delete
Name: SMALL, RONALD J SR
Address: 2374 FOX HOLLOW DR
City-St-Zip: VERNON, FL 32462

ADDITIONS/CHANGES:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT E SMALL

MGRM

02/21/2008

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