2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Dec 13, 2005
Secretary of State

DOCUMENT# L03000051711

Entity Name: S & S TILE OF VOLUSIA LLC

Current Principal Place of Business:

501 WAYNE AV
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

2018 WILLOW OAK DR
EDGEWATER, FL 32141

Current Mailing Address:

501 WAYNE AV
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

2018 WILLOW OAK DR
EDGEWATER, FL 32141

FEI Number: **FEI Number Applied For (X)** **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:

HARRINGTON, SHANE
501 WAYNE AV
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

HARRINGTON, SHANE
2018 WILLOW OAK DR
EDGEWATER, FL 32132 US

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: SHANE HARRINGTON 12/13/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HARRINGTON, SHANE
Address: 501 WAYNE AV
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGRM ( ) Delete
Name: BAUER, SCOTT
Address: 1148 N SINGLETON AV
City-St-Zip: TITUSVILLE, FL 32796

Title: MGRM (X) Delete
Name: BOTSFORD, DAVID
Address: 232 ROBINSON RD
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HARRINGTON, SHANE
Address: 2018 WILLOW OAK
City-St-Zip: EDGEWATER, FL 32141

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 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: SHANE HARRINGTON MGRM 12/13/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date