

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000053705

**FILED**  
**Sep 24, 2006**  
**Secretary of State**

**Entity Name:** ANTHONY W ROSCELLO III INTERIOR TRIM CARPENTRY L L C

**Current Principal Place of Business:**

403 SEFFNER VALRICO RD  
VALRICO, FL 33594 US

**New Principal Place of Business:**

**Current Mailing Address:**

403 SEFFNER VALRICO RD  
VALRICO, FL 33594 US

**New Mailing Address:**

FEI Number: 20-0486426      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

ROSCELLO, ANTHONY W III  
403 SEFFNER VALRICO RD  
VALRICO, FL 33594 US

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

ROSCELLO III, ANTHONY W MR.  
403 SEFFNER VALRICO RD  
VALRICO, FL 33594 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: ANTHONY W. ROSCELLO III

09/24/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ROSCELLO, ANTHONY W MR  
Address: 403 SEFFNER VALRICO RD  
City-St-Zip: VALRICO, FL 33594 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ROSCELLO III, ANTHONY W MR  
Address: 403 SEFFNER VALRICO RD  
City-St-Zip: VALRICO, FL 33594 US

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: ANTHONY W. ROSCELLO III

MGR

09/24/2006

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