

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000055619

**FILED**  
**May 17, 2005**  
**Secretary of State**

**Entity Name:** RONALD WILLIAMS LANDSCAPING & IRRIGATION, LLC

**Current Principal Place of Business:**

944 SOUTH CAROLINA AVE.  
ROCKLEDGE, FL 32955 US

**New Principal Place of Business:**

**Current Mailing Address:**

944 SOUTH CAROLINA AVE.  
ROCKLEDGE, FL 32955 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

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

WILLIAMS, RONALD  
944 SOUTH CAROLINA AVE.  
ROCKLEDGE, FL 32955 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: RONALD WILLIAMS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: WILLIAMS, RONALD  
Address: 944 SOUTH CAROLINA AVE.  
City-St-Zip: ROCKLEDGE, FL 32955 US

**ADDITIONS/CHANGES:**

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: RONALD WILLIAMS

MGR

05/17/2005

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