2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 12, 2007
Secretary of State

DOCUMENT# L03000056629

Entity Name: FINAL CONSTRUCTION SERVICES, LLC

Current Principal Place of Business:

1900 HI TECH LANE
FORT WALTON BEACH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

1900 HI TECH LANE
FORT WALTON BEACH, FL 32547 US

New Mailing Address:

639 GOLF COURE DRIVE
FORT WALTON BEACH, FL 32547 US

FEI Number: 81-0653241 **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:

OVERMAN, RICHARD E
639 GOLF COURSE DRIVE
FORT WALTON BEACH, FL 32547 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: RICHARD E. OVERMAN

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: OVERMAN, RICHARD E
Address: 639 GOLF COURSE DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGRM ( ) Delete
Name: OVERMAN, TRACY A
Address: 639 GOLF COURSE DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES:

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: TRACY A. OVERMAN MGRM 10/12/2007

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