

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000057056

Entity Name: T & S HOME SERVICES, LLC

FILED  
Oct 06, 2009  
Secretary of State

**Current Principal Place of Business:**

176 PLANTATION WAY  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

176 PLANTATION WAY  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

FEI Number: 74-3066336      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:**

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

BLAND, TIMOTHY  
176 PLANTATION WAY  
SANTA ROSA BEACH, FL 32459      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: TIMOTHY BLAND

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BLAND, TIMOTHY  
Address: 176 PLANTATION WAY  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM ( ) Delete  
Name: KRISER, BRAD  
Address: 176 PLANTATION WAY  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**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: TIMOTHY BLAND

MGR

10/06/2009

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