

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000057184

Entity Name: SPICER INSULATION, LLC

**FILED**  
**Nov 06, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

1457 SE LANVALE STREET  
LAKE CITY, FL 32025

**New Principal Place of Business:**

**Current Mailing Address:**

1457 SE LANVALE STREET  
LAKE CITY, FL 32025

**New Mailing Address:**

FEI Number: 02-0723054      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:**

PETTREY, SADIE  
14293 111TH PLACE  
MCALPIN, FL 32062      US

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

SPICER, BRUCE  
1457 SE LANVALE STREET  
LAKE CITY, FL 32025      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: BRUCE SPICER

11/06/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: SPICER, BRUCE  
Address: 1457 SE LANVALE STREET  
City-St-Zip: LAKE CITY, FL 32025

**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 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: BRUCE SPICER

MGR

11/06/2009

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