

# 2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000057447

FILED  
Oct 11, 2004  
Secretary of State

Entity Name: PAVE-RITE, LLC

**Current Principal Place of Business:**

5271 SANTA GERTRUDAS DRIVE  
MILTON, FL 32583

**New Principal Place of Business:**

**Current Mailing Address:**

5271 SANTA GERTRUDAS DRIVE  
MILTON, FL 32583

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) 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:**

BEAUREGARD, SIDNEY B III  
548 MARY ESTHER CUTOFF  
SUITE 18  
FORT WALTON BEACH, FL 32548 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: REEK, THOMAS L SR.  
Address: 5271 SANTA GERTRUDAS DRIVE  
City-St-Zip: MILTON, FL 32583

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: REEK, THOMAS L JR.  
Address: 5271 SANTA GERTRUDAS DRIVE  
City-St-Zip: MILTON, FL 32583

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: REEK, CARYL L  
Address: 5271 SANTA GERTRUDAS DRIVE  
City-St-Zip: MILTON, FL 32583

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: THOMAS L REEK

MGRM

10/11/2004

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