


2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L03000057574		
1. Entity Name MGS CONSTRUCTION LLC		

Principal Place of Business 14462 NW STATE ROAD 20 BRISTOL, FL 32321	Mailing Address 14462 NW STATE ROAD 20 BRISTOL, FL 32321
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400234949704
05/10/12--01025--016 **377.50



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc		Suite, Apt. #, etc	
City & State		City & State	
Zip	Country	Zip	Country

05102012 REIN-LLC CR2E101 (12/11)

4. FEI Number 04-3743809		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent GARCIA, MIGUEL 14462 NW STATE ROAD 20 BRISTOL, FL 32321		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE Miguel Garcia (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$377.50	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM GARCIA, MIGUEL 6515 WOODVILLE HWY TALLAHASSEE, FL 32305 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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REINSTATEMENT
2011, 2012

FILED
12 MAY 10 PM 1:54
TALLAHASSEE, FLORIDA

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Miguel Garcia Date E-MAIL ADDRESS