

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000004327

FILED
Jan 13, 2006
Secretary of State

Entity Name: OCTAVIO'S PAINTING, LLC

Current Principal Place of Business:

2411-3 WISPERING WOODS BLVD
JACKSONVILLE, FL 32246

New Principal Place of Business:

7901 BAYMEADOWS CR. EAST
394
JACKSONVILLE, FL 32256

Current Mailing Address:

2411-3 WISPERING WOODS BLVD
JACKSONVILLE, FL 32246

New Mailing Address:

7901 BAYMEADOWS CR. EAST
394
JACKSONVILLE, FL 32256

FEI Number: 73-1691559 **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:

GARCIA, OCTAVIO
2411-3 WISPERING WOODS BLVD
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

GARCIA, OCTAVIO
7901 BAYMEADOWS CR. EAST
394
JACKSONVILLE, FL 32256 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: OCTAVIO GARCIA

01/13/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GARCIA, OCTAVIO
Address: 2411-3 WISPERING WOODS BLVD
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GARCIA, OCTAVIO
Address: 7901 BAYMEADOWS CR. EAST, APT. 394
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the 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: OCTAVIO GARCIA

MGR

01/13/2006

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