

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000010021

**FILED**  
**Jun 10, 2008**  
**Secretary of State**

**Entity Name:** MEDINA PRESSURE CLEANING & SEALING, LLC

**Current Principal Place of Business:**

2918 ALCAZAR TERR  
NORTH PORT, FL 34286

**New Principal Place of Business:**

1279 MILIKEN TERRACE  
PORT CHARLOTTE, FL 33953

**Current Mailing Address:**

PO BOX 8024  
NORTH PORT, FL 34287

**New Mailing Address:**

**FEI Number:** 20-0740044      **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:**

MEDINA, JUAN C  
2918 ALCAZAR TERR  
NORTH PORT, FL 34286      US

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

MEDINA, JUAN C  
1279 MILIKEN TERRACE  
PORT CHARLOTTE, FL 33953      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: JUAN C MEDINA

06/10/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: MEDINA, JUAN C  
Address: 2918 ALCAZAR TERR  
City-St-Zip: NORTH PORT, FL 34286

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: MEDINA, JUAN C  
Address: PO BOX 8024  
City-St-Zip: NORTH PORT, FL 34287

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: JUAN C MEDINA

MGRM

06/10/2008

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