


2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 FEB -8 AM 9:07

DOCUMENT # L04000010145			
1. Entity Name T&B INSTALLATIONS LLC			
Principal Place of Business 2000 WESTWOOD DRIVE LONGWOOD, FL 32779 US		Mailing Address 2000 WESTWOOD DRIVE LONGWOOD, FL 32779 US	
2. Principal Place of Business 2000 Westwood Dr. Suite, Apt. #, etc.		3. Mailing Address 2000 Westwood Dr. Suite, Apt. #, etc.	
City & State Longwood FL		City & State Longwood FL	
Zip 32779		Zip 32779	
Country USA		Country USA	
4. FEI Number 571199302		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 NOVIELLO, TONY M. 2000 WESTWOOD DRIVE LONGWOOD, FL 32779		7. Name and Address of New Registered Agent Name Tony Novello Street Address (P.O. Box Number is Not Acceptable) 2000 Westwood Dr. City Longwood FL Zip Code 32779	
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 <u>Tony M. Novello</u> <u>Kelly Novello</u> <u>12/4/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$50.00 After January 1, 2006, Fee will be \$100.00		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.	
Make check payable to Florida Department of State		700066203237 02/20/06--01059--017 **100.00	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NOVIELLO, KELLY M 2000 WESTWOOD DRIVE LONGWOOD, FL 32779 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition REINSTATEMENT 05-06
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NOVIELLO, TONY M 2000 WESTWOOD DRIVE LONGWOOD, FL 32779 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>Tony M. Novello</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<u>12/4/05</u> <u>4078697528</u> <small>Date Daytime Phone #</small>	