

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000010957

**FILED**  
**Oct 03, 2012**  
**Secretary of State**

**Entity Name:** DWELLING REPAIRS LTD. CO.

**Current Principal Place of Business:**

2980 FOLSOM ROAD  
MIMS, FL 327542902 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 333  
MIMS, FL 327540333 US

**New Mailing Address:**

**FEI Number:** 86-1096138

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAMILTON, BRUCE  
2980 FOLSOM ROAD  
MIMS, FL 327542902 US

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

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: BRUCE HAMILTON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HAMILTON, BRUCE  
Address: P.O.BOX 333  
City-St-Zip: MIMS, FL 327540333 US

I hereby 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: BRUCE HAMILTON

MGRM

10/03/2012

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