

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000017996

FILED
Nov 07, 2006
Secretary of State

Entity Name: WEST COAST RENOVATIONS L.L.C.

Current Principal Place of Business:

2101 ALVARADO LANE
SARASOTA, FL 34231

New Principal Place of Business:

5907 NEW PARIS WAY
ELLENTON, FL 34222

Current Mailing Address:

2101 ALVARADO LANE
SARASOTA, FL 34231

New Mailing Address:

5907 NEW PARIS WAY
ELLENTON, FL 34222

FEI Number: 74-3193001 **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:

BARTLETT, KENNY
2101 ALVARADO LANE
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

BARTLETT, KENNY
5907 NEW PARIS WAY
ELLENTON, FL 34222 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: KENNY BARTLETT

11/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: QUERRARD, DEVLON
Address: 3012 GULF DRIVE
City-St-Zip: HOLMES BEACH, FL 34217

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: BARTLETT, KENNY
Address: 5907 NEW PARIS WAY
City-St-Zip: ELLENTON, FL 34222

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: KENNY BARTLETT

MGRM

11/07/2006

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