

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L04000024756

1. Entity Name  
HANNAH PLUMBING, LLC



FILED

06 APR 11 AM 11:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
2018 TRIMBLE ROAD  
TALLAHASSEE, FL 32308

Mailing Address  
2018 TRIMBLE ROAD  
TALLAHASSEE, FL 32308

2. Principal Place of Business

3. Mailing Address

2889 D. West Tharpe St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04112006 REIN-LLC CR2E101 (11/05)

City & State

City & State

Tallahassee, Fla.

4. FEI Number

☒ Applied For  
☐ Not Applicable

Zip

Country

Zip

Country

32303

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PITTMAN, LARRY  
2018 TRIMBLE ROAD  
TALLAHASSEE, FL 32308

Name  
Larry Pittman

Street Address (P.O. Box Number is Not Acceptable)  
2018 Trimble Rd.

City  
Tallahassee FL Zip Code  
32303

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  
Larry Pittman

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$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

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
PITTMAN, LARRY  
2018 TRIMBLE ROAD  
TALLAHASSEE, FL 32308 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition  
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Larry Pittman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/11/16

Date

Daytime Phone #