2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000026603

Entity Name: ALL STAR PAINTING OF FLORIDA, L.L.C.

FILED Oct 31, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5956 BROKEN BOW LANE 681 JAMESTOWN BLVD

PORT ORANGE, FL 32127 #2026

ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

5956 BROKEN BOW LANE 681 JAMESTOWN BLVD

PORT ORANGE, FL 32127 #2026

ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 38-3705788 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: Name and Address of New Registered Agent:

SULIVAN, JOHN PATRICK SULLIVAN, JOHN PATRICK 5956 BRÓKEN BOW LANE 681 JAMESTOWN BLVD

PORT ORANGE, FL 32127 US #2026 ALTAMONTE SPRINGS, FL 32714 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: JOHN PATRICK SULLIVAN

10/31/2006 Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change () Addition SULLIVAN, JOHN PATRICK SULLIVAN, JOHN PATRICK Name: Name: Address: 5956 BROKEN BOW LANE Address: 681 JAMESTOWN BLVD

City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: JOHN PATRICK SULLIVAN **MGRM** 10/31/2006