

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000029623

**FILED**  
**Nov 02, 2006**  
**Secretary of State**

**Entity Name:** HUNGWELLDRYWALL, LLC.

**Current Principal Place of Business:**

1000 NE43RD STREET  
OCALA, FL 34479 US

**New Principal Place of Business:**

1000 NE 43RD STREET  
OCALA, FL 34479 US

**Current Mailing Address:**

1000 NE 43RD STREET  
OCALA, FL 34479 US

**New Mailing Address:**

**FEI Number:** 16-1698133      **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:**

SCALF, WILLIAM  
1000 NE 43RD STREET  
OCALA, FL 34479 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: WILLIAM SCALF

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SCALF, WILLIAM  
Address: 1000 NE 43RD STREET  
City-St-Zip: Ocala, FL 34479 US

**ADDITIONS/CHANGES:**

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

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: WILLIAM SCALF

MGR

11/02/2006

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