

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000035521

**FILED**  
**Oct 27, 2011**  
**Secretary of State**

**Entity Name:** K.L. CONSTRUCTION LIMITED LIABILITY COMPANY.

**Current Principal Place of Business:**

4048 WESTMINSTER DR.  
SARASOTA, FL 34241

**New Principal Place of Business:**

**Current Mailing Address:**

6647 MIDNIGHT PASS RD  
#15  
SARASOTA, FL 34242 US

**New Mailing Address:**

6547 MIDNIGHT PASS RD  
#15  
SARASOTA, FL 34242 US

**FEI Number:** 30-0247949

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LARSON, DINA K  
4048 WESTMINSTER DR  
SARASOTA, FL 34241 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:** DINA K. LARSON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** P  
**Name:** LARSON, KEVIN L SR.  
**Address:** 1920 BARSTOW PL  
**City-St-Zip:** SARASOTA, FL 34235

**Title:** VP  
**Name:** FRICKE, BILL M MR  
**Address:** 6547 MIDNIGHT PASS RD #15  
**City-St-Zip:** SARASOTA, FL 34242

**Title:** MGR  
**Name:** PHELPS, DOUGLAS  
**Address:** 6547 MIDNIGHT PASS RD #15  
**City-St-Zip:** SARASOTA, FL 34242 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:** DOUGLAS PHELPS

MGR

10/27/2011

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