2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000051080

9632 LAKE PINE PLACE

TAMPA, FL 33635

Address:

City-St-Zip:

Entity Name: EMORY M. GARLAND PLUMBING CO., LLC

FILED Aug 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 17410 US HIGHWAY 41 N LUTZ, FL 33548 **Current Mailing Address: New Mailing Address:** P.O. BOX 2705 LUTZ, FL 33548 FEI Number: 83-0402657 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) 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: ALL FLORIDA FIRM INC. NRAI SERVICES, INC 465 S VOLUSIA AVE 2731 EXECUTIVÉ PARK DR SUITE C SUITE 400 ORANGE CITY, FL 32763 US WESTON, FL 33351 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: MEGHAN RECORD 08/13/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete MGRM Title: () Change () Addition GARLAND, EMORY M Name: Name: Address: P.O. BOX 2705 Address: City-St-Zip: LUTZ, FL 33548 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: GARLAND, GLADA H Name: Address: P.O. BOX 2705 Address: City-St-Zip: LUTZ, FL 33548 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition GARLAND, THOMAS Name: Name: 9632 LAKE PINE PLACE Address: Address: City-St-Zip: TAMPA, FL 33635 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: GARLAND, WILLIAM Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: GLADA H GARLAND MGRM 08/13/2009