## 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L04000055026

Entity Name: COVER ALL PAINTING, LLC

FILED Oct 12, 2005 Secretary of State

(X) Change ( ) Addition

() Change () Addition

ELDRIDGE, JANET M

SOUTHPORT, FL 32409

8922 DOROTHY FARRIS RD

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

8922 DOROTHY FARRIS RD SOUTHPORT, FL 32409

**Current Mailing Address: New Mailing Address:** 

8922 DOROTHY FARRIS RD SOUTHPORT, FL 32409

FEI Number: 51-0514810 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CORRICK, JANET ELDRIDGE ELDRIDGE, JANET M 8922 DOROTHY FARRIS RD 8922 DORÓTHY FARRIS RD SOUTHPORT, FL 32409 SOUTHPORT, FL 32409

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: JANET MARIE ELDRIDGE 10/12/2005

> Electronic Signature of Registered Agent Date

> > Title:

Name:

Address:

City-St-Zip:

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete CORRICK, JANET E Name: Address: 8922 DOROTHY FARRIS RD

City-St-Zip: SOUTHPORT, FL 32409

Title: MGRM (X) Delete Name: REID, JAMES DAVID Address: 1605 CLAY AVE City-St-Zip:

Title: Name: Address: PANAMA CITY, FL 32405 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JANET MARIE ELDRIDGE **MGRM** 10/12/2005