

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000063142

**FILED**  
**Oct 04, 2005**  
**Secretary of State**

**Entity Name:** JUAN RIVERA'S CABINET INSTALLATION "LLC"

**Current Principal Place of Business:**

7510 ALMARK ST  
TAMPA, FL 33625

**New Principal Place of Business:**

3701 POSTWOOD CR  
APT 101  
TAMPA, FL 33614 US

**Current Mailing Address:**

7510 ALMARK ST  
TAMPA, FL 33625

**New Mailing Address:**

3701 POSTWOOD CR  
APT 101  
TAMPA, FL 33614 US

**FEI Number:** 14-1840066      **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:**

RIVERA, JUAN C  
7510 ALMARK ST  
TAMPA, FL 33625 US

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

RIVERA, JUAN C  
3701 POSTWOOD CR  
APT 101  
TAMPA, FL 33614 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: JUAN C RIVERA

10/04/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RIVERA, JUAN C  
Address: 7510 ALMARK ST  
City-St-Zip: TAMPA, FL 33625

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: RIVERA, JUAN C  
Address: 3701 POSTWOOD CR APT101  
City-St-Zip: TAMPA, FL 33614

Title: MGR ( ) Change (X) Addition  
Name: RIVERA, RICHARD F  
Address: 3701 POSTWOOD CR APT 101  
City-St-Zip: TAMPA, FL 33614 US

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: JUAN C RIVERA

MGR

10/04/2005

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