

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000072979

FILED
Sep 29, 2007
Secretary of State

Entity Name: CABLING INNOVATIONS, LLC

Current Principal Place of Business:

2079 RANGE ROAD
CLEARWATER, FL 33765

New Principal Place of Business:

10448 SKY FLOWER CT.
LAND O LAKES, FL 34638

Current Mailing Address:

5139 BALDOCK
SPRING HILL, FL 34608

New Mailing Address:

10448 SKY FLOWER CT.
LAND O LAKES, FL 34638

FEI Number: 20-1723322 **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:

CARTER, PETER A
5193 BALDOCK AVE
SPRING HILL, FL 34608 US

Name and Address of New Registered Agent:

CARTER, PETER A
10448 SKY FLOWER CT.
LAND O LAKES, FL 34638 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: PETER A. CARTER

09/29/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: M () Delete
Name: CARTER, PETER A
Address: 5193 BALDOCK AVE
City-St-Zip: SPRING HILL, FL 34608

ADDITIONS/CHANGES:

Title: M (X) Change () Addition
Name: CARTER, PETER A
Address: 10448 SKY FLOWER CT.
City-St-Zip: LAND O LAKES, FL 34638

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.

SIGNATURE: PETER A. CARTER

M

09/29/2007

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