

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



11022006 REIN-LLC CR2E101 (11/05)

DOCUMENT # L04000077484 1. Entity Name HASSETT INSTALLATIONS, LLC																													
Principal Place of Business 1126 SNEAD AVE. SARASOTA, FL 34237		Mailing Address 1126 SNEAD AVE. SARASOTA, FL 34237																											
2. Principal Place of Business 5346 WOODVALE DR Suite, Apt. #, etc.		3. Mailing Address 5346 WOODVALE DR. Suite, Apt. #, etc.																											
City & State SARASOTA FL.		City & State SARASOTA FL.		4. FEI Number 56-2509189																									
Zip 34232		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required																									
6. Name and Address of Current Registered Agent HASSETT, KEVIN 3824 VIRGA BLVD. SARASOTA, FL 34234			7. Name and Address of New Registered Agent Name KEVIN HASSETT Street Address (P.O. Box Number is Not Acceptable) 5346 WOODVALE DR. City SARASOTA FL Zip Code 34232																										
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE KEVIN HASSETT <i>Kevin Hassett</i> 10/2/2006 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																													
FILE NOW!!! FEE IS \$50.00 After January 1, 2007, Fee will be \$100.00		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State																									
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">MGR HASSETT, KEVIN</td> <td style="width: 20%; text-align: center;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2">3842 VIRGA BLVD.</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">SARASOTA, FL 34234</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> </table>			TITLE	MGR HASSETT, KEVIN	<input checked="" type="checkbox"/> Delete	NAME	3842 VIRGA BLVD.		STREET ADDRESS	SARASOTA, FL 34234		CITY-ST-ZIP			10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">MGR HASSETT, KEVIN</td> <td style="width: 20%; text-align: center;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2">5346 WOODVALE DR</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">SARASOTA, FL 34232</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> </table>			TITLE	MGR HASSETT, KEVIN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	5346 WOODVALE DR		STREET ADDRESS	SARASOTA, FL 34232		CITY-ST-ZIP		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: KEVIN HASSETT <i>Kevin Hassett</i> 11/2/2006 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>																													