

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L04000080080

Entity Name
PRO BUILT HOMES LLC



05 SEP 26 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09262005 REIN-LLC CR2E101 (6/04)

4. FEI Number ☒ Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

Principal Place of Business
3160 LOOKOUT TRAIL
TALLAHASSEE, FL 32309

Mailing Address
3160 LOOKOUT TRAIL
TALLAHASSEE, FL 32309

2. Principal Place of Business

2910 KERRY FOREST PKWY

3. Mailing Address

2910 KERRY FOREST PKWY

Suite, Apt. #, etc.

D4-128

Suite, Apt. #, etc.

D4-128

City & State

TALLAHASSEE, FL

City & State

TALLAHASSEE, FL

Zip

32309

Country

USA

Zip

32309

Country

USA

6. Name and Address of Current Registered Agent

RAGHEB, GEORGE
2910 KERRY FOREST PKWY D4-128
TALLAHASSEE, FL 32309

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

John S. Pellham

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
After January 1, 2006, 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

TITLE MGRM ☐ Delete
NAME PELHAM, JOHN SHANNON
STREET ADDRESS 2910 KERRY FOREST PKWY D4-128
CITY-ST-ZIP TALLAHASSEE, FL 32309

TITLE MGRM ☐ Delete
NAME RAGHEB, GEORGE
STREET ADDRESS 2910 KERRY FOREST PKWY D4-128
CITY-ST-ZIP TALLAHASSEE, FL 32309

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME 600059941776
STREET ADDRESS 09/26/05--01024--014 **50.00
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

John S. Pellham

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

9-26-05

Daytime Phone #