

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000093607

Entity Name: TRE-TECH, LLC

FILED  
Sep 26, 2005  
Secretary of State

## Current Principal Place of Business:

4383 SIDEWINDER TRAIL  
MIDDLEBURG, FL 32068

## New Principal Place of Business:

10367 MEADOW POINTE DRIVE  
JACKSONVILLE, FL 32221

## Current Mailing Address:

4383 SIDEWINDER TRAIL  
MIDDLEBURG, FL 32068

## New Mailing Address:

10367 MEADOW POINTE DRIVE  
JACKSONVILLE, FL 32221

FEI Number: 20-2102082      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:

OLCOTT, DAVID J SR.  
4383 SIDEWINDER TRAIL  
MIDDLEBURG, FL 32068      US

## Name and Address of New Registered Agent:

OLCOTT, DAVID J SR.  
10367 MEADOW POINTE DRIVE  
JACKSONVILLE, FL 32221      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: DAVID J OLCOTT SR

09/26/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: OLCOTT, DAVID J SR.  
Address: 4383 SIDEWINDER TRAIL  
City-St-Zip: MIDDLEBURG, FL 32068

Title: MGRM ( ) Delete  
Name: LIROSI, GREGG T SR.  
Address: 9739 SWEETLEAF STREET  
City-St-Zip: ORLANDO, FL 32827

Title: MGRM ( ) Delete  
Name: COILL, KENNETH M  
Address: 6110 4TH STREET EAST  
City-St-Zip: BRADENTON, FL 34203

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: OLCOTT, DAVID J SR.  
Address: 10367 MEADOW POINTE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: DAVID J OLCOTT SR

PRES

09/26/2005

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