

DOCUMENT# L05000012334

Entity Name: PROFESSIONAL INSEPCTION & CONSTRUCTION SERVICES, LLC

New Principal Place of Business:**New Mailing Address:**

Certificate of Status Desired ()

Name and Address of New Registered Agent:

SIGNATURE:

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MEACHAM, DAVID
Address: 4907 SHETLAND AVENUE
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES:

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

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: DAVID A MEACHAM

PRES

04/26/2007

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