

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000024071

FILED
Jul 09, 2007
Secretary of State

Entity Name: ALL-AMERICAN PAINTING, LLC

Current Principal Place of Business:

14209 BIG ISLAND POND RD
SOUTHPORT, FL 32409

New Principal Place of Business:

14209 BIG ISLAND POND RD
SOUTHPORT, FL 32409 US

Current Mailing Address:

14209 BIG ISLAND POND RD
SOUTHPORT, FL 32409

New Mailing Address:

14209 BIG ISLAND POND RD
SOUTHPORT, FL 32409 US

FEI Number: 43-2078583

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBOUR, DAN A
14209 BIG ISLAND POND RD
PANAMA CITY, FL 32409 US

Name and Address of New Registered Agent:

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: DAN A BARBOUR

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BARBOUR, DAN A
Address: 14209 BIG ISLAND POND RD
City-St-Zip: SOUTHPORT, FL 32409 US

Title: MGR () Delete
Name: BULLARD, MICHEAL D
Address: 14209 BIG ISLAND POND RD
City-St-Zip: SOUTHPORT, FL 32409

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BARBOUR, DAN A
Address: 14209 BIG ISLAND POND RD
City-St-Zip: SOUTHPORT, FL 32409 US

Title: MGRM (X) Change () Addition
Name: BULLARD, MICHEAL D
Address: 14209 BIG ISLAND POND RD
City-St-Zip: SOUTHPORT, FL 32409 US

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: DAN A BARBOUR

MGRM

07/09/2007

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