

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000026571

FILED
Nov 09, 2008
Secretary of State

Entity Name: J P CUSTOM TILE & WOOD FLOORS LLC

Current Principal Place of Business:

59 S ST ANDREWS DR
ORMOND BEACH, FL 32174

New Principal Place of Business:

148 GULL DR. SOUTH
DAYTONA BEACH, FL 32119

Current Mailing Address:

59 S ST ANDREWS DR
ORMOND BEACH, FL 32174

New Mailing Address:

148 GULL DR. SOUTH
DAYTONA BEACH, FL 32119

FEI Number: 02-9709189 **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:

JOHN, POKU
59 S ST ANDREWS DR
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

JOHN, POKU
148 GULL DR. SOUTH
DAYTONA BEACH, FL 32119 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: JOHN POKU

11/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: POKU, JOHN
Address: 59 S ST ANDREWS DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR () Delete
Name: SANTIAGO, PATRICIA
Address: 59 S ST ANDREWS DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR () Delete
Name: SANTIAGO, JOSE M SR
Address: 59 S ST ANDREWS DR
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: POKU, JOHN
Address: 59 S ST ANDREWS DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR (X) Change () Addition
Name: HAINES, AMY L
Address: 148 GULL DR. SOUTH
City-St-Zip: DAYTONA BEACH, FL 32119

Title: MGR (X) Change () Addition
Name: CARLSON, CHARLES E
Address: 913 TRACY ST.
City-St-Zip: HOLLY HILL, FL 32117

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: AMY L. HANIES

MGR

11/09/2008

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