

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000033377

FILED  
Sep 18, 2006  
Secretary of State

Entity Name: H & L CUSTOM CONCEPTS LLC

**Current Principal Place of Business:**

1586 MILLER RD  
SANTA ROSA BEACH, FL 32459 US

**New Principal Place of Business:**

**Current Mailing Address:**

1586 MILLER RD  
SANTA ROSA BEACH, FL 32459 US

**New Mailing Address:**

P.O. BOX 1438  
SANTA ROSA BEACH, FL 32459 US

FEI Number: FEI Number Applied For (X) 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:**

STANLEY, LEROY D  
1586 MILLER RD  
SANTA ROSA BEACH, FL 32459 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: LEROY D STANLEY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: STANLEY, LEROY D  
Address: 1586 MILLER RD  
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGR ( ) Change (X) Addition  
Name: STANLEY, SHARON  
Address: 1586 MILLER ROAD  
City-St-Zip: SANTA ROSA BEACH, FL 32459

I hereby certify that the information supplied with this filing does not qualify for the 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: LEROY D STANLEY

MGRM

09/18/2006

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