

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000038327

FILED
Jul 12, 2007
Secretary of State

Entity Name: CYRIL CAMPBELL LLC

Current Principal Place of Business:

9791 EVANS ROAD
POLK CITY, FL 33868 US

New Principal Place of Business:

924 ROBERTS ROAD
90 AND 91
LAKE HAMILTON, FL 33851 US

Current Mailing Address:

9791 EVANS ROAD
POLK CITY, FL 33868 US

New Mailing Address:

FEI Number: 20-2709252 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CAMPBELL, DALINDA D
9791 EVANS ROAD
POLK CITY, FL 33868 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: DALINDA D CAMPBELL

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CAMPBELL, CYRIL G
Address: 9791 EVANS ROAD
City-St-Zip: POLK CITY, FL 33868 US

Title: MGRM () Delete
Name: CAMPBELL, DALINDA D
Address: 9791 EVANS ROAD
City-St-Zip: POLK CITY, FL 33868 US

ADDITIONS/CHANGES:

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 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: CYRIL CAMPBELL

MGR

07/12/2007

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