

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000039299

**FILED**  
**Apr 02, 2008**  
**Secretary of State**

**Entity Name:** FOAM MOLDINGS & DESIGNS, LLC

**Current Principal Place of Business:**

6001 JOHNS RD  
117  
TAMPA, FL 33634

**New Principal Place of Business:**

4814 NORT MANHATTAN AVE  
TAMPA, FL 33614

**Current Mailing Address:**

6001 JOHNS RD  
117  
TAMPA, FL 33634

**New Mailing Address:**

4814 NORT MANHATTAN AVE  
TAMPA, FL 33614

**FEI Number:** 76-9017384      **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:**

HERNANDEZ, ALEXIS  
6001 JOHNS RD  
117  
TAMPA, FL 33634 US

**Name and Address of New Registered Agent:**

HERNANDEZ, ALEXIS  
3211 WEST BEACH ST  
TAMPA, FL 33607 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: ALEXIS HERNANDEZ

04/02/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HERNANDEZ, ALEXIS  
Address: 6001 JOHNS RD # 117  
City-St-Zip: TAMPA, FL 33634

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: HERNANDEZ, ALEXIS  
Address: 3211 WEST BEACH ST  
City-St-Zip: TAMPA, FL 33607

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: ALEXIS HERNANDEZ

MGRM

04/02/2008

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