

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000049323

1. Entity Name  
MARSTON CONSTRUCTION, L.L.C.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 DEC 29 AM 8:30

Principal Place of Business  
8430 PRESTWICK PLACE  
NEWPORT RICHEY, FL 34655

Mailing Address  
8430 PRESTWICK PLACE  
NEWPORT RICHEY, FL 34655

2. Principal Place of Business  
2454 Commack Ct

3. Mailing Address  
1324 Seven Springs Blvd.

State, Apt. #, etc.

State, Apt. #, etc.  
#186

12172006 REIN-LLC CR2E101 (11/05)

City & State  
New Port Richey, FL

City & State  
New Port Richey, FL

4. FEI Number  
20-2923560

Applic For  
Not Applicable

Zip  
34655

Country

Zip  
34655

Country  
Pasco

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KATZ, HELMUTH  
8430 PRESTWICK PLACE  
NEWPORT RICHEY, FL 34655

Name  
Katz, Helmuth

Street Address (P.O. Box Number is Not Acceptable)  
4132 Racoon Loop

City  
New Port Richey

FL

Zip Code  
34653

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00  
After January 1, 2007, Fee will be \$100.00

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
MGR  
MARSTON, CONSTANTINOS  
STREET ADDRESS  
2454 CAMMACK COURT  
CITY-STATE-ZIP  
NEW PORT RICHEY, FL 34655

☐ Delete

TITLE  
NAME  
MGR  
GOUGH, JOHN W JR.  
STREET ADDRESS  
3433 KIMBERLY OAKS DRIVE  
CITY-STATE-ZIP  
HOLIDAY, FL 34691

☐ Delete

TITLE  
NAME  
MGR  
KATZ, HELMUTH  
STREET ADDRESS  
8430 PRESTWICK PLACE  
CITY-STATE-ZIP  
NEW PORT RICHEY, FL 34655

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
100082822781  
12/29/06--01038--012 \*\*50.00

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
Mgr.  
Gough, John W. Jr.  
10345 Armidillo Ct.  
New Port Richey, FL 34654

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
Mgr.  
Katz, Helmuth  
4132 Racoon Loop  
New Port Richey, FL 34653

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
Mgr.  
Olive, William  
1322 Belcher Drive  
Tarpon Springs, FL 34689

☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *[Signature]* CONSTANTINOS MARSTON 12/20/06 727-460-1881

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #