

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000050288

FILED
Oct 12, 2009
Secretary of State

Entity Name: COX GENERAL CONTRACTING, LLC

Current Principal Place of Business:

37011 LAKE YALE PLACE
GRAND ISLAND, FL 32735

New Principal Place of Business:

Current Mailing Address:

37011 LAKE YALE PLACE
GRAND ISLAND, FL 32735

New Mailing Address:

FEI Number: 56-2515476 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:

Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FLOOR
MIAMI, FL 33145 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: JEREMY COX

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: COX, JEREMY
Address: 37011 LAKE YALE PLACE
City-St-Zip: GRAND ISLAND, FL 32735

Title: MGR () Delete
Name: COX, CHARISE
Address: 37011 LAKE YALE PLACE
City-St-Zip: GRAND ISLAND, FL 32735

Title: SEC () Delete
Name: BOONE, TERRY A
Address: 1507 S POINTE DRIVE
City-St-Zip: LEESBURG, FL 32748

ADDITIONS/CHANGES:

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

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: JEREMY COX

MGR

10/12/2009

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