

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000057252

FILED
Nov 26, 2007
Secretary of State

Entity Name: PREFERRED CONSTRUCTION ENTERPRISES, LLC

Current Principal Place of Business:

149 GOLF CLUB LN.
VENICE, FL 34292

New Principal Place of Business:

1102 LUCILLE AVE
NOKOMIS, FL 34275

Current Mailing Address:

149 GOLF CLUB LN.
VENICE, FL 34292

New Mailing Address:

1102 LUCILLE AVE
NOKOMIS, FL 34275

FEI Number: 20-3012563 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:

ALL FLORIDA FIRM INC
465 S VOLUSIA AVE SUITE C
ORANGE CITY, FL 32763 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: DEVIN NEWMAN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TROYER, IVAN R
Address: 149 GOLF CLUB LN.
City-St-Zip: VENICE, FL 34292

Title: MGR () Delete
Name: TROYER, KATHRYN A
Address: 149 GOLF CLUB LN.
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TROYER, IVAN R
Address: 1102 LUCILLE AVE
City-St-Zip: NOKOMIS, FL 34275

Title: MGR (X) Change () Addition
Name: TROYER, KATHRYN A
Address: 1102 LUCILLE AVE
City-St-Zip: NOKOMIS, FL 34275

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: DEVIN NEWMAN

CSM

11/26/2007

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