

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000057774

FILED
May 25, 2007
Secretary of State

Entity Name: ADDISON TILE LLC

Current Principal Place of Business:

2322 INDIA PALM DR.
EDGEWATER, FL 32141 US

New Principal Place of Business:

1423 PALMETTO ST
NEW SMYRNA BEACH, FL 32168 US

Current Mailing Address:

2322 INDIA PALM DR.
EDGEWATER, FL 32141 US

New Mailing Address:

1423 PALMETTO ST
NEW SMYRNA BEACH, FL 32168 US

FEI Number: 20-3198422 **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:

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN RD
SUITE 400
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

ADDISON, DUSTIN
1423 PALMETTO ST
NEW SMYRNA BEACH, FL 32168 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: DUSTIN ADDISON

05/25/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ADDISON, DUSTIN
Address: 2322 INDIA PALM DR
City-St-Zip: EDGEWATER, FL 32141 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ADDISON, DUSTIN
Address: 2517 ORANGE TREE DR
City-St-Zip: EDGEWATER, FL 32141 US

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: DUSTIN ADDISON

MGMR

05/25/2007

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