

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000063050

FILED
Apr 16, 2007
Secretary of State

Entity Name: EMERALD COAST PROFESSIONAL ERECTORS, LLC

Current Principal Place of Business:

4937 GRASSY PONT RD
CHIPLEY, FL 32428 US

New Principal Place of Business:

4408 LEISURE LAKES DRIVE
CHIPLEY, FL 32428 US

Current Mailing Address:

4937 GRASSY PONT RD
CHIPLEY, FL 32428 US

New Mailing Address:

4408 LEISURE LAKES DRIVE
CHIPLEY, FL 32428 US

FEI Number: 27-0125985 **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:

CURETON, RICKY D JR
4937 GRASSY POND RD
CHIPLEY, FL 32428 US

Name and Address of New Registered Agent:

CURETON, RICKY D JR
4408 LEISURE LAKES DRIVE
CHIPLEY, FL 32428 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: RICKY D CURETON JR.

04/16/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CURETON, RICKY D JR
Address: 4937 GRASSY POND RD
City-St-Zip: CHIPLEY, FL 32428 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CURETON, RICKY D JR
Address: 4408 LEISURE LAKES DRIVE
City-St-Zip: CHIPLEY, FL 32428 US

I hereby certify that the information supplied with this filing does not qualify for the 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: RICKY D CURETON JR

MGRM

04/16/2007

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