## 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L05000080582

Name:

Address:

City-St-Zip:

WILLIAMS, JOSEPH MICHAEL

780 INDUSTRIAL DRIVE

CRESTVIEW, FL 32539

Entity Name: DOUBLE J & D PROPERTIES, LLC

FILED Jul 23, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 143 CARR DRIVE 780 INDUSTRIAL DRIVE CRESTVIEW, FL 32536 CRESTVIEW, FL 32539 **Current Mailing Address: New Mailing Address:** 143 CARR DRIVE 780 INDUSTRIAL DRIVE CRESTVIEW, FL 32536 CRESTVIEW, FL 32539 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLSTEAD, JAMES ALLEN WILLIAMS, JOSEPH M 143 CARR DRIVE 780 INDUSTRIAL DRIVE CRESTVIEW, FL 32536 US US CRESTVIEW, FL 32539 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: JOSEPH M WILLIAMS 07/23/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete CHAMBERLAIN, DAVID A Name: Name: 780 INDUSTRIAL DR. Address: Address: City-St-Zip: CRESTVIEW, FL 32539 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: DAY, GEORGE DEXTER Name: Address: 7274 SENTERFITT ROAD Address: City-St-Zip: LAUREL HILL, FL 32567 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HOLSTEAD, JAMES ALLEN Name: Name: Address: 143 CARR DRIVE Address: City-St-Zip: CRESTVIEW, FL 32536 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOSEPH M WILLIAMS MGRM 07/23/2007