

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000087155

**Entity Name:** TROPICAL CHEM-DRY LLC

**FILED**  
**Sep 27, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1930 SW. EXETER CT.  
PORT SAINT LUCIE, FL 34953

**New Principal Place of Business:**

9600 S. OCEAN DR.  
1005  
JENSEN BEACH, FL 34957

**Current Mailing Address:**

1930 SW. EXETER CT.  
PORT SAINT LUCIE, FL 34953

**New Mailing Address:**

9600 S. OCEAN DR.  
1005  
JENSEN BEACH, FL 34957

**FEI Number:** 06-1757653

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCLAVERTY, JASON  
1930 SW. EXETER CT.  
PORT SAINT LUCIE, FL 34953 US

**Name and Address of New Registered Agent:**

MCLAVERTY, JASON  
9600 S. OCEAN DR.  
1005  
JENSEN BEACH, FL 34957 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: JASON MCLAVERTY

09/27/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MCLAVERTY, JASON  
Address: 9600 S. OCEAN DR. #1005  
City-St-Zip: JENSEN BEACH, FL 34957

I hereby 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: JASON MCLAVERTY

MANA

09/27/2011

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