

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000094637

**FILED**  
**Oct 30, 2007**  
**Secretary of State**

**Entity Name:** HOME APPEAL SPECIALISTS, LLC

**Current Principal Place of Business:**

1539 GRANADA AVE  
HOLLY HILL, FL 32117

**New Principal Place of Business:**

**Current Mailing Address:**

1539 GRANADA AVE  
HOLLY HILL, FL 32117

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

NEGRON, LUIS R  
1539 GRANADA AVE  
HOLLY HILL, FL 32117 US

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

BEYER, JULIAN H  
1539 GRANADA AVE  
HOLLY HILL, FL 32117 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: JULIAN H BEYER

10/30/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BEYER, RUTH  
Address: 1539 GRANADA AVE  
City-St-Zip: HOLLY HILL, FL 32117

Title: MGRM (X) Delete  
Name: NEGRON, LUIS  
Address: 1539 GRANADA AVE  
City-St-Zip: HOLLY HILL, FL 32117

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RUTH BEYER

MGRM

10/30/2007

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