2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Sep 19, 2006
Secretary of State

DOCUMENT# L05000098636

Entity Name: THE BIG ROOFING COMPANY, LLC

Current Principal Place of Business:

1559 NW 79TH AVENUE
DORAL, FL 33126 US

New Principal Place of Business:

7819 NW 15 ST
DORAL, FL 33126 US

Current Mailing Address:

1559 NW 79TH AVENUE
DORAL, FL 33126 US

New Mailing Address:

7819 NW 15 ST
DORAL, FL 33126 US

FEI Number: 84-1691594 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: ANTHONY DELMEDICO

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DELMEDICO, ANTHONY
Address: 55 SKYLINE DRIVE, STE 2300
City-St-Zip: LAKE MARY, FL 32746 US

Title: MGRM ( ) Delete
Name: LEGENDARY ASSETS, LL, C
Address: 2425 EAST CAMELBACK ROAD, STE 800
City-St-Zip: PHOENIX, AZ 85016 US

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 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: ANTHONY DELMEDICO MGRM 09/19/2006

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