

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000099079

Entity Name: A & K TRUCKING LLC

**FILED**  
**Jan 18, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

4365 SW 10TH PL  
101  
DEERFIELD BEACH, FL 33442 US

**New Principal Place of Business:**

658 SW ABRAHAM AVE.  
PORT ST. LUCIE, FL 34953 US

**Current Mailing Address:**

4365 SW 10TH PL  
101  
DEERFIELD BEACH, FL 33442 US

**New Mailing Address:**

658 SW ABRAHAM AVE.  
PORT ST. LUCIE, FL 34953 US

FEI Number: 20-3599733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VELOZ-PEREZ, H. GABRIEL  
4365 SW 10TH PL  
101  
DEERFIELD BEACH, FL 33442 US

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

VELOZ-PEREZ, H. GABRIEL  
658 SW ABRAHAM AVE.  
PORT ST. LUCIE, FL 34953 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: H. GABRIEL VELOZ-PEREZ

01/18/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: VELOZ-PEREZ, H. GABRIEL  
Address: 4365 SW 10TH PL # 101  
City-St-Zip: DEERFIELD BEACH, FL 33442 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: VELOZ-PEREZ, H. GABRIEL  
Address: 658 SW ABRAHAM AVE.  
City-St-Zip: PORT ST. LUCIE, FL 34953 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: H.GABRIEL VELOZ-PEREZ

MGRM

01/18/2007

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