## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L05000101427

Entity Name: T.N.T. RESTORATION, LLC

FILED Nov 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3242 DALE HURST DRIVE WEST 8915 JASPER AVENUE JACKSONVILLE, FL 32277 JACKSONVILLE, FL 32211

Current Mailing Address: New Mailing Address:

3242 DALE HURST DRIVE WEST 8915 JASPER AVENUE JACKSONVILLE, FL 32277 JACKSONVILLE, FL 32211

FEI Number: 20-3622282 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MILLS, THOMAS E

3242 DALE HURST DRIVE WEST

JACKSONVILLE, FL 32277 US

MILLS, THOMAS E

8915 JASPER AVENUE

JACKSONVILLE, FL 32211 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: THOMAS E. MILLS 11/01/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 MILLS, THOMAS E
 Name:
 MILLS, THOMAS E

 Address:
 3242 DALE HURST DRIVE WEST
 Address:
 8915 JASPER AVENUE

 City-St-Zip:
 JACKSONVILLE, FL 32277
 City-St-Zip:
 JACKSONVILLE, FL 32211

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: THOMAS E MILLS MGR 11/01/2009