

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000105525

FILED
Oct 21, 2009
Secretary of State

Entity Name: LUCINDO & DOUG TREE SERVICE LLC

Current Principal Place of Business:

11330 TOPAZ ST.
SPRING HILL, FL 34608

New Principal Place of Business:

Current Mailing Address:

11330 TOPAZ ST.
SPRING HILL, FL 34608

New Mailing Address:

FEI Number: 43-1862224 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

O'BERRY, DOUG
11330 TOPAZ ST.
SPRING HILL, FL 34608 US

Name and Address of New Registered Agent:

ALVARADO, LUCINDO
11330 TOPAZ ST.
SPRING HILL, FL 34608 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: LUCINDO ALVARADO

10/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALVARADO, LUCINDO
Address: 11330 TOPAZ ST.
City-St-Zip: SPRING HILL, FL 34608

Title: MGR () Delete
Name: O'BERRY, DOUG
Address: 26041 HEBRON ST
City-St-Zip: BROOKSVILLE, FL 34601

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: LUCINDO ALVARADO

MR

10/21/2009

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