

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000106051

Entity Name: TRIPLE O, LLC

FILED  
Jul 23, 2008  
Secretary of State

## Current Principal Place of Business:

759 GREY HERON  
CHULUOTA, FL 32766

## New Principal Place of Business:

4611 RUMMELL ROAD  
SAINT CLOUD, FL 34771

## Current Mailing Address:

PO BOX 621968  
OVIEDO, FL 32765

## New Mailing Address:

4611 RUMMELL ROAD  
SAINT CLOUD, FL 34771

FEI Number: 20-3727576      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:

OJEDA, OSVALDO O  
759 GREY HERON  
CHULUOTA, FL 32766      US

## Name and Address of New Registered Agent:

OJEDA, OSVALDO O  
4611 RUMMELL ROAD  
SAINT CLOUD, FL 34771      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: OSVALDO O OJEDA

07/23/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR      ( ) Delete  
Name: OJEDA, OSVALDO O  
Address: 759 GREY HERON  
City-St-Zip: CHULUOTA, FL 32766

Title: MGR      ( ) Delete  
Name: OJEDA, MARIA  
Address: 759 GREY HERON  
City-St-Zip: CHULUOTA, FL 32766

## ADDITIONS/CHANGES:

Title: MGR      (X) Change ( ) Addition  
Name: OJEDA, OSVALDO O  
Address: 4611 RUMMELL ROAD  
City-St-Zip: SAINT CLOUD, FL 34771

Title: MGR      (X) Change ( ) Addition  
Name: OJEDA, MARIA  
Address: 4611 RUMMELL ROAD  
City-St-Zip: SAINT CLOUD, FL 34771

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: OSVALDO O OJEDA

MGR

07/23/2008

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