

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000113411

**FILED**  
**Oct 14, 2009**  
**Secretary of State**

**Entity Name:** STORM GUARD SCREEN ENCLOSURES, LLC

**Current Principal Place of Business:**

1629 PRIME CT.  
STE 700  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

1629 PRIME CT.  
SUITE 700  
ORLANDO, FL 32809

**New Mailing Address:**

1315 S. COMMERCIAL DR.  
SUITE 201B  
FOLEY, AL 36535

**FEI Number:** 51-0560362      **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:**

BAIRD, EDWARD M ESQ  
WRIGHT, FULFORD, MOORHEAD & BROWN, P.A.  
145 NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801 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:** EWARD BAIRD

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** LINEHAN, JAMES  
**Address:** 15950 ACORN CIRCLE  
**City-St-Zip:** TAVARES, FL 32788

**Title:** MGRM (X) Delete  
**Name:** RAMSEY, JAMES  
**Address:** 483 TUPELO CIR  
**City-St-Zip:** DAVENPORT, FL 33897

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** LINEHAN, JAMES  
**Address:** 6859 CRIMSON LN  
**City-St-Zip:** GULF SHORES, AL 36542

**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:** JAMES LINEHAN

**PRES**

**10/14/2009**

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