

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000118320

1. Entity Name
B & B REAL ESTATE HOLDINGS, LLC



Principal Place of Business
2509 SUCCESS DRIVE
UNIT 1
ODESSA, FL 33556 US

Mailing Address
2509 SUCCESS DRIVE
UNIT 1
ODESSA, FL 33556 US

2. Principal Place of Business
2512 Success Drive
Suite, Apt. #, etc.

3. Mailing Address
2512 Success Drive
Suite, Apt. #, etc.

City & State
Odessa, FL
Zip
33556
Country
USA

City & State
Odessa, FL
Zip
33556
Country
USA

12182006 REIN-LLC CR2E101 (11/05)

4. FEI Number ☒ Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ORSATTI, CHAD T ESQ.
3204 ALTERNATE 19 NORTH
PALM HARBOR, FL 34683

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2007, Fee will be \$200.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM	<input checked="" type="checkbox"/> Delete
NAME	BENOIT, DOUGLAS G JR.	
STREET ADDRESS	2509 SUCCESS DRIVE, UNIT 1	
CITY-ST-ZIP	ODESSA, FL 33556	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	Benoit, Douglas G. Jr.	
STREET ADDRESS	2512 Success Drive	
CITY-ST-ZIP	Odessa, FL 33556	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	Benoit, Christine	
STREET ADDRESS	2512 Success Drive	
CITY-ST-ZIP	Odessa, FL 33556	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	Breton, Ronald	
STREET ADDRESS	2512 Success Drive	
CITY-ST-ZIP	Odessa, FL 33556	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	Breton, Deborah A.	
STREET ADDRESS	2512 Success Drive	
CITY-ST-ZIP	Odessa, FL 33556	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	200089029322	
STREET ADDRESS	02/23/07--01007--007 **200.00	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Deborah A. Breton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date: 2/15/07 (727) 376 0890 Daytime Phone #

FILED
07 FEB 19 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

