


**FILED**  
**Aug 23, 2007 8:00 am**  
**Secretary of State**

DOCUMENT # L05000118424					
<b>1. Entity Name</b> FORTIFIED BUILDING SOLUTIONS, LLC					
<b>Principal Place of Business</b> 1301 SIXTH AVENUE WEST, SUITE 401 BRADENTON, FL 34205			<b>Mailing Address</b> 1301 SIXTH AVENUE WEST, SUITE 401 BRADENTON, FL 34205		
<b>2. Principal Place of Business - No P.O. Box #</b>			<b>3. Mailing Address</b>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Country	
6. Name and Address of Current Registered Agent					
BARNEBEY, MARK P 1301 SIXTH AVENUE WEST, SUITE 401 BRADENTON, FL 34205					Name
					Street Address
					City
					State
<b>8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.</b>					
SIGNATURE: <u>James P. Powers III</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>					
<b>Filing Fee is \$50.00</b> <b>Due by September 14, 2007</b>					
9. MANAGING MEMBERS / MANAGERS					
TITLE	MGR	<input type="checkbox"/> Delete	TITLE	MGR	<input type="checkbox"/> Delete
NAME	TAYLOR, GREG		NAME	TAYLOR, GREG	
STREET ADDRESS	1301 SIXTH AVENUE WEST, SUITE 401		STREET ADDRESS	1301 SIXTH AVENUE WEST, SUITE 401	
CITY - ST - ZIP	BRADENTON, FL 34205		CITY - ST - ZIP	BRADENTON, FL 34205	
TITLE	MGR	<input type="checkbox"/> Delete	TITLE	MGR	<input type="checkbox"/> Delete
NAME	POWERS, JAMES P III		NAME	POWERS, JAMES P III	
STREET ADDRESS	1301 SIXTH AVENUE WEST, SUITE 401		STREET ADDRESS	1301 SIXTH AVENUE WEST, SUITE 401	
CITY - ST - ZIP	BRADENTON, FL 34205		CITY - ST - ZIP	BRADENTON, FL 34205	
TITLE	MGR	<input type="checkbox"/> Delete	TITLE	MGR	<input type="checkbox"/> Delete
NAME	BARNEBEY, MARK P		NAME	BARNEBEY, MARK P	
STREET ADDRESS	1301 SIXTH AVENUE WEST, SUITE 401		STREET ADDRESS	1301 SIXTH AVENUE WEST, SUITE 401	
CITY - ST - ZIP	BRADENTON, FL 34205		CITY - ST - ZIP	BRADENTON, FL 34205	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
<b>11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Article 13 of the New York State Limited Liability Company Law, and that my signature shall have the same legal effect as if I am the owner of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 13 of the New York State Limited Liability Company Law.</b>					
<b>SIGNATURE:</b> <u>James P. Powers III Mark P. Barnebey</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					