2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# L06000016790

Entity Name: A PLUS HOME IMPROVEMENTS LLC

Current Principal Place of Business:

11481 HALETHORPE DR.
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

11481 HALETHORPE DR.
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MOGAVERO, RON
11481 HALETHORPE DR.
JACKSONVILLE, FL 32223 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: RONALD MOGAVERO

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: MOGAVERO, RON
Address: 11481 HALETHORPE DR.
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MOGAVERO, RONALD
Address: 11481 HALETHORPE DR.
City-St-Zip: JACKSONVILLE, FL 32223

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: RONALD MOGAVERO MGR 03/02/2009

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