

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000022329

**FILED**  
**Jan 30, 2014**  
**Secretary of State**

**Entity Name:** LEAP OF FAITH CONSTRUCTION, LLC

**Current Principal Place of Business:**

509 GAINOUS RD  
PANAMA CITY BEACH, FL 32413 US

**New Principal Place of Business:**

3282 SYLVANIA RD  
VERNON, FL 32462 US

**Current Mailing Address:**

509 GAINOUS RD  
PANAMA CITY BEACH, FL 32413 US

**New Mailing Address:**

3282 SYLVANIA RD  
VERNON, FL 32462 US

**FEI Number:** 02-0770015

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BARTON, STEVE W  
509 GAINOUS RD  
PANAMA CITY BEACH, FL 32413 US

**Name and Address of New Registered Agent:**

BARTON, STEVE W  
3282 SYLVANIA RD  
VERNON, FL 32462 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:** STEVEN W BARTON

01/30/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

**Title:** MGRM  
**Name:** BARTON, STEVEN W  
**Address:** 3282 SYLVANIA RD  
**City-St-Zip:** VERNON, FL 32462 US

**Title:** MGRM  
**Name:** BARTON, KATHIE A  
**Address:** 3282 SYLVANIA RD  
**City-St-Zip:** VERNON, FL 32462 US

**Title:** MGRM  
**Name:** PARKS, TOMMY J  
**Address:** 3282 -D SYLVANIA RD  
**City-St-Zip:** VERNON, FL 32462

I hereby 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

**SIGNATURE:** STEVEN W BARTON

MGRM

01/30/2014

Electronic Signature of Authorized Person

Date