

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000027109

FILED
Oct 15, 2007
Secretary of State

Entity Name: MR SIDE JOBS ENVIROMENTAL SPECIALIST LLC

Current Principal Place of Business:

3670 NW 100 STREET
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

3670 NW 100 STREET
MIAMI, FL 33147

New Mailing Address:

FEI Number: 20-4487908 **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:

ROJAS, WILFREDO
3670 NW 100 STREET
MIAMI, FL 33147 US

Name and Address of New Registered Agent:

ROJAS, WILFREDO C
3670 NW 100 STREET
MIAMI, FL 33147 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: WILFREDO C. ROJAS

10/15/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ROJAS, WILFREDO
Address: 3670 NW 100 STREET
City-St-Zip: MIAMI, FL 33147

Title: MGRM () Delete
Name: ROJAS, GLADYS
Address: 70 NW 100 STREET
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ROJAS, WILFREDO C
Address: 3670 NW 100 STREET
City-St-Zip: MIAMI, FL 33147

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: WILFREDO C. ROJAS

MGR

10/15/2007

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