

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000030438

FILED
Oct 05, 2007
Secretary of State

Entity Name: QUAILTY PAINTING & COATINGS LLC

Current Principal Place of Business:

1120 MINEOLA CIRCLE
PALM HARBOR, FL 34683 US

New Principal Place of Business:

844 GREENFIELD DRIVE
PALM HARBOR, FL 34684 US

Current Mailing Address:

1120 MINEOLA CIRCLE
PALM HARBOR, FL 34683 US

New Mailing Address:

844 GREENFIELD DRIVE
PALM HARBOR, FL 34684 US

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

Name and Address of Current Registered Agent:

PEASE, PAUL
1120 MINEOLA CIRCLE
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

PEASE, PAUL
844 GREENFIELD DRIVE
PALM HARBOR, FL 34684 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: PAUL ROBERT PEASE

10/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PEASE, PAUL
Address: 2928 GLEN HAVEN DRIVE
City-St-Zip: PALM HARBOR, FL 34684 US

Title: MGRM () Delete
Name: KAZOGLES, MIKE
Address: 1120 MINEOLA CIRCLE
City-St-Zip: PALM HARBOR, FL 34683 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PEASE, PAUL
Address: 844 GREENFIELD DRIVE
City-St-Zip: PALM HARBOR, FL 34684 US

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: PAUL ROBERT PEASE

OWN

10/05/2007

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