

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000032310

**FILED**  
**Nov 13, 2007**  
**Secretary of State**

**Entity Name:** HOME PERIMETER FENCING L.L.C.

**Current Principal Place of Business:**

1191 WEST 59 PLACE  
HIALEAH, FL 33012

**New Principal Place of Business:**

8050 SW 170 ST  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

1191 WEST 59 PLACE  
HIALEAH, FL 33012

**New Mailing Address:**

8050 SW 170 ST  
PALMETTO BAY, FL 33157

FEI Number: 20-4661292      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:**

PAREDES, RAFAEL JR  
1191 WEST 59 PLACE  
HIALEAH, FL 33012      US

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

PAREDES, RAFAEL JR  
8050 SW 170 ST  
PALMETTO BAY, FL 33157      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: RAFAEL PAREDES JR

11/13/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: PAREDES, RAFAEL JR  
Address: 1191 WEST 59 PLACE  
City-St-Zip: HIALEAH, FL 33012

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: PAREDES, RAFAEL JR  
Address: 8050 SW 170 ST  
City-St-Zip: PALMETTO BAY, FL 33157

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: RAFAEL PAREDES JR

MNGR

11/13/2007

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