

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000033612

**FILED**  
**Apr 20, 2010**  
**Secretary of State**

**Entity Name:** QUALITY POOL SERVICES NORTH FLORIDA LLC

**Current Principal Place of Business:**

1143 SUMMERS ROAD  
BRISTOL, FL 32321

**New Principal Place of Business:**

11431 SUMMERS ROAD  
BRISTOL, FL 32321

**Current Mailing Address:**

P O BOX 133  
BRISTOL, FL 323210133

**New Mailing Address:**

FEI Number: 20-4599617      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:**

STAFFORD, MANNIE J  
1143 SUMMERS ROAD  
BRISTOL, FL 32321      US

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

STAFFORD, MANNIE J  
11431 SUMMERS ROAD  
BRISTOL, FL 32321      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: MANNIE JAY STAFFORD

04/20/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: STAFFORD, MANNIE J  
Address: P O BOX 133  
City-St-Zip: BRISTOL, FL 323210133

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 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: MANNIE J STAFFORD

MGRM

04/20/2010

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