

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000049332

Entity Name: MILLS & SONS STUCCO LLC

FILED
Nov 02, 2007
Secretary of State

Current Principal Place of Business:

3361 LAUREL DRIVE
GULF BREEZE, FL 32563 SR

New Principal Place of Business:

2745 AUGUSTUS RD
NAVARRE, FL 32566 SR

Current Mailing Address:

3361 LAUREL DRIVE
GULF BREEZE, FL 32563 SR

New Mailing Address:

2745 AUGUSTUS RD
NAVARRE, FL 32566

FEI Number: 16-1759953 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

MILLS, JOHN E
3361 LAUREL DRIVE
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

MILLS, JOHN E
2745 AUGUSTUS RD
NAVARRE, FL 32566 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: JOHN MILLS

11/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MILLS, JOHN E
Address: 3361 LAUREL DRIVE
City-St-Zip: GULF BREEZE, FL 32563

Title: MGRM (X) Delete
Name: MILLS, WILLIAM
Address: 8195 SEVILLE DR
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MILLS, JOHN E
Address: 2745 AUGUSTUS RD
City-St-Zip: NAVARRE, FL 32566

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: JOHN MILLS

MGR

11/02/2007

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