

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000056955

**FILED**  
**Oct 08, 2007**  
**Secretary of State**

**Entity Name:** REYNOLDS PRECISION CARPENTRY LLC

**Current Principal Place of Business:**

5504 16TH AVE S.  
GULFPORT, FL 33707 US

**New Principal Place of Business:**

5065 NW 62ND AVE.  
OCALA, FL 34482 US

**Current Mailing Address:**

5504 16TH AVE S.  
GULFPORT, FL 33707 US

**New Mailing Address:**

5065 NW 62ND AVE.  
OCALA, FL 34482 US

**FEI Number:** 20-5093001      **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:**

BRENT, REYNOLDS A  
5504 16TH AVE S  
GULFPORT, FL 33707 US

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

BRENT, REYNOLDS A  
5065 NW 62ND AVE.  
OCALA, FL 34482 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: BRENT REYNOLDS

10/08/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: REYNOLDS, BRENT A  
Address: 5504 16TH AVE S  
City-St-Zip: GULFPORT, FL 33707 US

Title: MGR ( ) Delete  
Name: REYNOLDS, SHANNON M  
Address: 5504 16 AVE S  
City-St-Zip: GULFPORT, FL 33707 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: REYNOLDS, BRENT A  
Address: 5065 NW 62ND AVE.  
City-St-Zip: OCALA, FL 34482 US

Title: MGR (X) Change ( ) Addition  
Name: REYNOLDS, SHANNON M  
Address: 5065 NW 62ND AVE.  
City-St-Zip: OCALA, FL 34482 US

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: BRENT REYNOLDS

OWNE

10/08/2007

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