

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000059771

FILED
Nov 02, 2007
Secretary of State

Entity Name: ALCALA FLOOR COVERING LLC

Current Principal Place of Business:

2424 LAKE AVE.
A
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

2424 LAKE AVE.
A
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

Name and Address of New Registered Agent:

ALCALA, TOMAS
2424 LAKE AVE.
A
SANFORD, FL 32771 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: TOMAS ALCALA

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALCALA, TOMAS
Address: 2424 LAKE AVE. APT. A
City-St-Zip: SANFORD, FL 32771 US

Title: MGR (X) Delete
Name: ALCALA, FILIBERTO
Address: 2424 LAKE AVE. APT. A
City-St-Zip: SANFORD, FL 32771 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TOMAS ALCALA

MGR

11/02/2007

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