

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000071106

**FILED**  
**Oct 03, 2010**  
**Secretary of State**

**Entity Name:** ALL HURRICANE SOLUTIONS LLC

**Current Principal Place of Business:**

3598 QUANTUM LAKES DRIVE  
BOYNTON BEACH, FL 33426

**New Principal Place of Business:**

**Current Mailing Address:**

3598 QUANTUM LAKES DRIVE  
BOYNTON BEACH, FL 33426

**New Mailing Address:**

**FEI Number:** 22-3938059

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POPOWSKI, BRIAN M  
3598 QUANTUM LAKES DRIVE  
BOYNTON BEACH, FL 33426 US

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

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:** BRIAN M POPOWSKI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** POPOWSKI, BRIAN  
**Address:** 3598 QUANTUM LAKES DRIVE  
**City-St-Zip:** BOYNTON BEACH, FL 33426

**Title:** MGR  
**Name:** POPOWSKI, ALAN  
**Address:** 3598 QUANTUM LAKES DRIVE  
**City-St-Zip:** BOYNTON BEACH, FL 33426

**Title:** S  
**Name:** POPOWSKI, ALAN  
**Address:** 3598 QUANTUM LAKES DRIVE  
**City-St-Zip:** BOYNTON BEACH, FL 33426

**Title:** T  
**Name:** POPOWSKI, BRIAN  
**Address:** 3598 QUANTUM LAKES DRIVE  
**City-St-Zip:** BOYNTON BEACH, FL 33426

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:** BRIAN M POPOWSKI

MGR

10/03/2010

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