

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000071336

FILED
Jul 26, 2008
Secretary of State

Entity Name: ED'S PRO TILE LLC

Current Principal Place of Business:

6050 SHADOW OAK CT
JACKSONVILLE, FL 32277 US

New Principal Place of Business:

Current Mailing Address:

6050 SHADOW OAK CT
JACKSONVILLE, FL 32277 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:

NULL, EDWARD
6050 SHADOW OAK CT
JACKSONVILLE, FL 32277 US

Name and Address of New Registered Agent:

NULL, EDWARD J
6050 SHADOW OAK CT
JACKSONVILLE, FL 32277 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: EDWARD J NULL

07/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NULL, EDWARD
Address: 6050 SHADOW OAK CT
City-St-Zip: JACKSONVILLE, FL 32277 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NULL, EDWARD J
Address: 6050 SHADOW OAK CT
City-St-Zip: JACKSONVILLE, FL 32277 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: EDWARD J NULL

MGRM

07/26/2008

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