

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000071812

Entity Name: RELIABLE CONCRETE LLC

FILED
Jun 30, 2008
Secretary of State

Current Principal Place of Business:

3601 W. COMMERCIAL BLVD., SUITE 35
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

1773 N. STATE ROAD 7
SECOND FLOOR
LAUDERHILL, FL 33313

Current Mailing Address:

3601 W. COMMERCIAL BLVD., SUITE 35
FT. LAUDERDALE, FL 33309

New Mailing Address:

1773 N. STATE ROAD 7
SECOND FLOOR
LAUDERHILL, FL 33313

FEI Number: 20-5242301 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:

DAVIS, KENNY M
7160 N.W. 47TH PLACE
LAUDERHILL, FL 33319 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: KENNY M. DAVIS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: DAVIS, KENNY M
Address: 7160 N.W. 47TH PLACE
City-St-Zip: LAUDERHILL, FL 33319

Title: V () Delete
Name: DAVIS, MICHELLE B
Address: 7160 N.W. 47TH PLACE
City-St-Zip: LAUDERHILL, FL 33319

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: KENNY M. DAVIS

P

06/30/2008

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