## 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L06000072078

Entity Name: INDA'S STUCCO LLC

FILED Oct 10, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1813 WOODBROOK CIR WINDSOR CT

APT H ALABASTER, AL 35007

ALABASTER, AL 35007

**Current Mailing Address: New Mailing Address:** 

1813 WOODBROOK CIR WINDSOR CT

ALABASTER, AL 35007 APT H ALABASTER, AL 35007

FEI Number: 20-3757410 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: Name and Address of New Registered Agent:

ARJONA INDA, MAURO A 700 BAULDYNG AVE

PENSACOLA, FL 32507 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: LAIPIN VANLANDINGHAM

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: () Delete

(X) Change ( ) Addition MGR ARJONA INDA, MAURO A ARJONA INDA, MAURO A Name: Name:

Address: 1813 WOODBROOK CIR APT H Address: WINDSOR CT City-St-Zip: ALABESTER, AL 35007 City-St-Zip: ALABESTER, AL 35007

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition Name: IBARRA, RAMON Name: IBARRA, RAMON

Address: 700 BAULDYNG AVE APT 4 Address: 700 BAULDYNG AVE APT4 City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: PENSACOLA, FL 32507

Title: MGRM () Delete Title: () Change () Addition

MINJARES, BERNARDO Name: Name: Address: 700 BAULDYNG AVE APT 4 Address: City-St-Zip: PENSACOLA, FL 32507 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: LAIPIN VANLANDDINGHAM 10/10/2007