

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000083016

**FILED**  
**Oct 27, 2008**  
**Secretary of State**

**Entity Name:** TWENTY FOUR HOUR APPRAISALS, LLC

**Current Principal Place of Business:**

33150 STATE ROAD 70 EAST  
MYAKKA CITY, FL 34251 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 21155  
BRADENTON, FL 34204 US

**New Mailing Address:**

**FEI Number:** 20-5423236      **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:**

SLENTZ, JULIE A  
33150 STATE ROAD 70 EAST  
MYAKKA CITY, FL 34251 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: JULIE SLENTZ

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR      ( ) Delete  
**Name:** SLENTZ, JULIE A  
**Address:** 33150 STATE ROAD 70 EAST  
**City-St-Zip:** MYAKKA CITY, FL 34251

**ADDITIONS/CHANGES:**

**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: JULIE SLENTZ

MGR

10/27/2008

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