

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000083021

**FILED**  
**Oct 05, 2013**  
**Secretary of State**

**Entity Name:** A. NEEDLES CONSTRUCTION, LLC

**Current Principal Place of Business:**

5807 HIGHWAY 90  
MILTON, FL 32583 US

**New Principal Place of Business:**

5523 PINERIDGE DR  
MILTON, FL 32570 US

**Current Mailing Address:**

5807 HIGHWAY 90  
MILTON, FL 32583 US

**New Mailing Address:**

5523 PINERIDGE DR  
MILTON, FL 32570 US

**FEI Number:** 20-5462763

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIFFORD & HAGOOD, LLC  
1053 MAITLAND CENTER COMMONS  
STE 101  
MAITLAND, FL 32751 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:** AMANDA GIFFORD

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** NEEDLES, MICHAEL S  
**Address:** 5523 PINERIDGE DR  
**City-St-Zip:** MILTON, FL 32570 US

**Title:** PRES  
**Name:** NEEDLES, ANDREW  
**Address:** 5523 PINERIDGE DR  
**City-St-Zip:** MILTON, FL 32570

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:** MICHAEL NEEDLES

MGRM

10/05/2013

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