

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000093306

**FILED**  
**Sep 21, 2007**  
**Secretary of State**

**Entity Name:** TOM DUNPHY & ASSOCIATES, LLC

**Current Principal Place of Business:**

9776 MONTAGUE STREET  
TAMPA, FL 33626 US

**New Principal Place of Business:**

1403 SAFFRON WAY  
TRINITY, FL 34655 US

**Current Mailing Address:**

9776 MONTAGUE STREET  
TAMPA, FL 33626 US

**New Mailing Address:**

**FEI Number:** 26-1108184      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

DUNPHY, THOMAS  
1403 SAFFRON WAY  
TRINITY, FL 34655 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: THOMAS DUNPHY

09/21/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DUNPHY, THOMAS  
Address: 9776 MONTAGUE STREET  
City-St-Zip: TAMPA, FL 33626 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DUNPHY, THOMAS  
Address: 1403 SAFFRON WAY  
City-St-Zip: TRINITY, FL 34655 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: THOMAS DUNPHY

MGRM

09/21/2007

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