2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Jan 06, 2008
Secretary of State

DOCUMENT# L06000095393

Entity Name: SYNERGY FENCE CONTRACTORS LLC

Current Principal Place of Business:

3434 SW24TH AVENUE
SUITE F
GAINESVILLE, FL 32607 US

New Principal Place of Business:

3434 SW 24TH AVENUE
SUITE F
GAINESVILLE, FL 32607 US

Current Mailing Address:

3434 SW24TH AVENUE
SUITE F
GAINESVILLE, FL 32607 US

New Mailing Address:

3434 SW 24TH AVENUE
SUITE F
GAINESVILLE, FL 32607 US

FEI Number: 20-5625936 **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:

SASSO, ADAIR
3434 SW24TH AVENUE
SUITE F
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

WILCOXON, DANNY J
3434 SW 24TH AVENUE
SUITE F
GAINESVILLE, FL 32607 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: DANNY JOE WILCOXON 01/06/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: SASSO, ADAIR
Address: 3434 SW24TH AVENUE, SUITE F
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES:

Title: GMGR (X) Change ( ) Addition
Name: WILCOXON, DANNY J
Address: 3434 SW 24 AVENUE, SUITE F
City-St-Zip: GAINESVILLE, FL 32607 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: DANNY JOE WILCOXON GMGR 01/06/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date