

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000096262

FILED  
Oct 11, 2007  
Secretary of State

Entity Name: GASKINS REMODELING LLC

**Current Principal Place of Business:**

13819 93RD DRIVE  
LIVE OAK, FL 32060 US

**New Principal Place of Business:**

**Current Mailing Address:**

13819 93RD DRIVE  
LIVE OAK, FL 32060 US

**New Mailing Address:**

FEI Number: 20-5647243      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:**

GASKINS, TERRY  
13819 93RD DRIVE  
LIVE OAK, FL 32060 US

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

GASKINS, TERRY L  
13819 93RD DRIVE  
LIVE OAK, FL 32060 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: TERRY L GASKINS

10/11/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GASKINS, TERRY  
Address: 13819 93RD DRIVE  
City-St-Zip: LIVE OAK, FL 32060 US

Title: MGR ( ) Delete  
Name: LAYCOCK, ELIZABETH  
Address: 13819 93RD DRIVE  
City-St-Zip: LIVE OAK, FL 32060 US

Title: MGR ( ) Delete  
Name: LAYCOCK, DAVID  
Address: 13819 93RD DRIVE  
City-St-Zip: LIVE OAK, FL 32060 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GASKINS, TERRY L  
Address: 13819 93RD DRIVE  
City-St-Zip: LIVE OAK, FL 32060 US

Title: MGR (X) Change ( ) Addition  
Name: LAYCOCK, ELIZABETH L  
Address: 13819 93RD DRIVE  
City-St-Zip: LIVE OAK, FL 32060 US

Title: MGR (X) Change ( ) Addition  
Name: LAYCOCK, DAVID M  
Address: 13819 93RD DRIVE  
City-St-Zip: LIVE OAK, FL 32060 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: ELIZABETH L, LAYCOCK

MGRM

10/11/2007

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