

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000099468

**FILED**  
**Oct 08, 2007**  
**Secretary of State**

**Entity Name:** SOUTHERN WINDOW AND DOOR LLC

**Current Principal Place of Business:**

11595 KELLY ROAD  
#115  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

11595 KELLY ROAD  
#115  
FORT MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 20-2940852      **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:**

PIERRO, ELAINE M  
11595 KELLY ROAD  
#115  
FORT MYERS, FL 33908 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: ELAINE PIERRO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: PRES ( ) Delete  
Name: PIERRO, ELAINE  
Address: 11595 KELLY ROAD  
City-St-Zip: FORT MYERS, FL 33908

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: COO ( ) Delete  
Name: SHEEHAN, JOHN  
Address: 11595 KELLY ROAD  
City-St-Zip: FORT MYERS, FL 33908

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: ELAINE PIERRO

PRES

10/08/2007

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