

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000103884

Entity Name: CUSTOM WOODWORX LLC

FILED
Sep 18, 2007
Secretary of State

Current Principal Place of Business:

1901 24TH ST CIR W
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

1901 24TH ST CIR W
PALMETTO, FL 34221

New Mailing Address:

FEI Number: 20-5818276 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:

ODEM, JAY R
1909 24TH ST CIR W
PALMETTO, FL 34221 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: JASON ODEM

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ODEM, JASON R
Address: 1909 24TH ST CIR W
City-St-Zip: PALMETTO, FL 34221

Title: MGRM () Delete
Name: FLINT, SHERYL A
Address: 1909 24TH ST CIR W
City-St-Zip: PALMETTO, FL 34221

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: SMITH, LASHAWN J
Address: 803 2ND AVENUE EAST #303
City-St-Zip: PALMETTO, FL 34221

Title: MGRM () Change (X) Addition
Name: YOST, JON K
Address: 3609 GLENRIDGE LN
City-St-Zip: SARASOTA, FL 34233 US

Title: MGRM () Change (X) Addition
Name: BROWN, ALAN M
Address: 1909 24TH ST CIR W
City-St-Zip: PALMETTO, FL 34221

Title: MGRM () Change (X) Addition
Name: FLINT, STEPHANIE L
Address: 3609 GLENRIDGE LN
City-St-Zip: SARASOTA, FL 34233

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: JASON R ODEM

MGR

09/18/2007

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