

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000005275

FILED
Feb 26, 2009
Secretary of State

Entity Name: ALL FLORIDA HOME SPECIALISTS, LLC

Current Principal Place of Business:

17 N.W. 12 STREET
FLORIDA CITY, FL 33034

New Principal Place of Business:

Current Mailing Address:

1651 SOUTH GOLDENWYV LANE
HOMESTEAD, FL 33035

New Mailing Address:

1651 SOUTH GOLDENEYE LANE
HOMESTEAD, FL 33035

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

SHIVER, STEVE
47 NORTH KROME AVENUE
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

RAMIREZ, WILBERT
1651 SOUTH GOLDENEYE LANE
HOMESTEAD, FL 33035 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: WILBERT RAMIREZ

02/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RAMIREZ, WILBERT
Address: 1651 SOUTH GOLDENEYE LANE
City-St-Zip: HOMESTEAD, FL 33035

ADDITIONS/CHANGES:

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: WILBERT RAMIREZ

MGR

02/26/2009

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