2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Aug 22, 2009
Secretary of State

DOCUMENT# L07000012468

Entity Name: R & D DESIGN BUILDERS AND RESTORATION, L.L.C.

Current Principal Place of Business:

1053 ROLLING OAKS AVE.
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

1053 ROLLING OAKS AVE.
TARPON SPRINGS, FL 34689

New Mailing Address:

FEI Number: 56-2638950 **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:

PAVLICK, DOUGLAS L
1053 ROLLING OAKS AVE.
TARPON SPRINGS, FL 34689 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: DOUGLAS PAVLICK

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: PAVLICK, DOUGLAS L
Address: 1053 ROLLING OAKS AVE.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MGRM ( ) Delete
Name: PAVLICK, RICHARD
Address: 1053 ROLLING OAKS AVE.
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: PAVLICK, RICHARD
Address: 1053 ROLLING OAK AVE
City-St-Zip: TARPON SPRINGS, FL 34689

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: DOUGLAS PAVLICK MGRM 08/22/2009

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