

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000016696

Entity Name: HITESWORTH, LLC

FILED
Sep 29, 2009
Secretary of State

Current Principal Place of Business:

4733 CHEVY PLACE
ORLANDO, FL 32811 US

New Principal Place of Business:

Current Mailing Address:

4733 CHEVY PLACE
ORLANDO, FL 32811 US

New Mailing Address:

8100 CHIANTI DR
ORLANDO, FL 32836 US

FEI Number: 20-8457425 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:

HOLLINGSWORTH, JAMES P
4733 CHEVY PLACE
ORLANDO, FL 32811 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: CASEY HITE D

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOLLINGSWORTH, JAMES P
Address: 4733 CHEVY PLACE
City-St-Zip: ORLANDO, FL 32811 US

Title: MGRM () Delete
Name: HITE, DEVIN
Address: 6032 PEREGRINE AVE
City-St-Zip: ORLANDO, FL 32819 US

Title: MGR () Delete
Name: HITE, CASEY D
Address: 3379 BURLINGTON DRIVE
City-St-Zip: ORLANDO, FL 32811 US

Title: MGR () Delete
Name: HODGSON, MATTHEW K
Address: 9412 WICKHAM WAY
City-St-Zip: ORLANDO, FL 32836 US

ADDITIONS/CHANGES:

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

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

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

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: CASEY HITE D

MGR

09/29/2009

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