

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000046068

FILED
Nov 04, 2008
Secretary of State

Entity Name: PRECISION PLUMBING LLC

Current Principal Place of Business:

11125 PARK BLVD
SUITE 104-176
SEMINOLE, FL 33772 US

New Principal Place of Business:

10830 GROVE TERRACE
SEMINOLE, FL 33772 US

Current Mailing Address:

11125 PARK BLVD
SUITE 104-176
SEMINOLE, FL 33772 US

New Mailing Address:

10830 GROVE TERRACE
SEMINOLE, FL 33772 US

FEI Number: 06-1715967 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:

FISCHER, LAWRENCE
898 85TH AVE N
ST PETERSBURG, FL 33702 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: LAWRENCE FISCHER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WALLING, MARK
Address: 10830 GROVE TERRACE
City-St-Zip: SEMINOLE, FL 33772 US

Title: MGRM () Delete
Name: HIGGINS, SONYA
Address: 10830 GROVE TERRACE
City-St-Zip: SEMINOLE, FL 33772 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: WALLING, SONYA
Address: 10830 GROVE TERRACE
City-St-Zip: SEMINOLE, FL 33772 US

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: SONYA L WALLING

MGRM

11/04/2008

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