

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000050352

Entity Name: GIRARD BROTHERS, LLC

**FILED**  
**Nov 05, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

53 WOODHOLLOW ROAD  
COLTS NECK, NJ 07722

**New Principal Place of Business:**

4360 OLD DIXIE HIGHWAY  
VERO BEACH, FL 32967

**Current Mailing Address:**

53 WOODHOLLOW ROAD  
COLTS NECK, NJ 07722

**New Mailing Address:**

4360 OLD DIXIE HIGHWAY  
VERO BEACH, FL 32967

FEI Number: 26-0207516      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:**

TAYLOR, J. ATWOOD II  
5070 N. HIGHWAY A1A SUITE 200  
VERO BEACH, FL 32963      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: JIM TAYLOR

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: GIRARD, TIMOTHY  
Address: 53 WOODHOLLOW ROAD  
City-St-Zip: COLTS NECK, NJ 07722

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: GIRARD, TIMOTHY  
Address: 2818 CARDINAL DRIVE  
City-St-Zip: VERO BEACH, FL 32963

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: TIMOTHY GIRARD

MGRM

11/05/2008

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