

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000071438

**FILED**  
**Feb 28, 2012**  
**Secretary of State**

**Entity Name:** B AND C POOL PIPING L.L.C.

**Current Principal Place of Business:**

1456 GRIFLET RD  
JACKSONVILLE, FL 32211 US

**New Principal Place of Business:**

**Current Mailing Address:**

1456 GRIFLET RD  
JACKSONVILLE, FL 32211 US

**New Mailing Address:**

14320 CRYSTAL COVE DR S  
JACKSONVILLE, FL 32224 US

**FEI Number:** 26-1886658

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ALL FLORIDA FIRM INC  
813 DELTONA BLVD  
STE A  
DELTONA, FL 32725 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: WILLIAM CIOFFI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CIOFFI, WILLIAM  
Address: 1456 GRIFLET RD  
City-St-Zip: JACKSONVILLE, FL 32211 US

I hereby 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: WILLIAM CIOFFI

MGMR

02/28/2012

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