

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000093177

**FILED**  
**Dec 03, 2009**  
**Secretary of State**

**Entity Name:** GISLER PLUMBING, LLC

**Current Principal Place of Business:**

6742 GULFPORT BLVD S  
APT 220  
ST PETERSBURG, FL 33707 US

**New Principal Place of Business:**

**Current Mailing Address:**

6742 GULFPORT BLVD S  
APT 220  
ST PETERSBURG, FL 33707 US

**New Mailing Address:**

**FEI Number:** 26-0888346      **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:**

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

GISLER, JOE N  
6742 GULFPORT BLVD S  
# 220  
SAINT PETERSBURG, FL 33707 US

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: JOSEPH GISLER

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GISLER, JOSEPH N  
Address: 6742 GULFPORT BLVD S APT 220  
City-St-Zip: ST. PETERSBURG, FL 33707 US

**ADDITIONS/CHANGES:**

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: JOE GISLER

MANA

12/03/2009

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