

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000093562

**FILED**  
**Oct 27, 2008**  
**Secretary of State**

**Entity Name:** RPR CONTRACTORS LLC

**Current Principal Place of Business:**

1728 TURKEY OAK DRIVE  
NAVARRE, FL 32566 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5328  
NAVARRE, FL 32566 US

**New Mailing Address:**

P.O. BOX 353  
OTSEGO, MI 49078 US

FEI Number: 74-3231194      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:**

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

KOZLOWSKI, RENEE  
1728 TURKEY OAK DRIVE  
NAVARRE, FL 32566 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: RENEE KOZLOWSKI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KOZLOWSKI, RENEE  
Address: 1728 TURKEY OAK DRIVE  
City-St-Zip: NAVARRE, FL 32566 US

Title: MGRM (X) Delete  
Name: PERROTTA, ROSEMARY  
Address: 1672 KAUAI COURT  
City-St-Zip: GULF BREEZE, FL 32563 US

**ADDITIONS/CHANGES:**

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: RENEE KOZLOWSKI

MGRM

10/27/2008

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