

2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000107548

FILED
Sep 27, 2010
Secretary of State

Entity Name: ROBERTS INSURANCE OF PORT RICHEY, LLC

Current Principal Place of Business:

10608 DEVCO DRIVE
PORT RICHEY, FL 34668

New Principal Place of Business:

Current Mailing Address:

10608 DEVCO DRIVE
PORT RICHEY, FL 34668

New Mailing Address:

FEI Number: 36-4618659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CALECA, TRACY A
1372 PINE RIDGE CIRCLE EAST UNIT F1
TARPON SPRINGS, FL 34688 US

Name and Address of New Registered Agent:

CALECA, TRACY A
1372 PINE RIDGE CIRCLE EAST
UNIT F1
TARPON SPRINGS, FL 34688 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: TRACY A CALECA

09/27/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ROBERTS, CHRISTOPHER S
Address: 10608 DEVCO DRIVE
City-St-Zip: PORT RICHEY, FL 34668

Title: MGRM
Name: CALECA, TRACY A
Address: 10608 DEVCO DRIVE
City-St-Zip: PORT RICHEY, FL 34668

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: TRACY A CALECA

OWNR

09/27/2010

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