

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000108284

**FILED**  
**Oct 21, 2008**  
**Secretary of State**

**Entity Name:** TOTAL ONE CONTRUCTION, LLC

**Current Principal Place of Business:**

1132 S. DIXIE HWY.  
CORAL GABLES, FL 33146 US

**New Principal Place of Business:**

**Current Mailing Address:**

1132 S. DIXIE HWY.  
CORAL GABLES, FL 33146 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

BUROZ, REYNALDO  
1132 SOUTH DIXIE HWY.  
CORAL GABLES, FL 33146 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: REYNALDO BUROZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BUROZ, REYNALDO  
Address: 1132 S. DIXIE HWY.  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: MGR ( ) Delete  
Name: ROSALYN, BUROZ  
Address: 1132 S. DIXIE HWY.  
City-St-Zip: CORAL GABLES, FL 33146 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: REY BUROZ

MGRM

10/21/2008

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