

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000119340

Entity Name: FLORIDA SOUTH TILE, LLC

FILED  
May 08, 2009  
Secretary of State

## Current Principal Place of Business:

2880 INDIANWOOD DRIVE  
SARASOTA, FL 34232 US

## New Principal Place of Business:

1160 PASTEUR RD  
BARTOW, FL 33830 US

## Current Mailing Address:

2880 INDIANWOOD DRIVE  
SARASOTA, FL 34232 US

## New Mailing Address:

1160 PASTEUR RD  
BARTOW, FL 33830 US

FEI Number: 26-1483912      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:

FLORIDA INSURANCE CONSULTING, INC.  
113 E. MAIN STREET  
SUITE 5  
BARTOW, FL 33830 US

## Name and Address of New Registered Agent:

FLORIDA INSURANCE CONSULTING, LLC.  
415-B E. MAIN STREET  
SUITE 5  
BARTOW, FL 33830 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: OZ LOPEZ

05/08/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LOPEZ, OZZIE R  
Address: 2880 INDIANWOOD DRIVE  
City-St-Zip: SARASOTA, FL 34232

Title: MGR ( ) Delete  
Name: LLORENTE, ANGELO P  
Address: 2845 RIDGE AVE  
City-St-Zip: SARASOTA, FL 34235 US

Title: MGR ( ) Delete  
Name: BENNETT, BRADLEY D  
Address: 2880 INDIANWOOD DRIVE  
City-St-Zip: SARASOTA, FL 34232 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: LOPEZ, OZZIE R  
Address: 1160 PASTEUR RD  
City-St-Zip: BARTOW, FL 33830

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: BENNETT, BRADLEY D  
Address: P.O. BOX 2681  
City-St-Zip: BARTOW, FL 33831 US

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: OZZIE R. LOPEZ

MGRM

05/08/2009

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