

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000120773

**FILED**  
**Mar 09, 2009**  
**Secretary of State**

**Entity Name:** T & S RIDER ENTERPRISES LLC

**Current Principal Place of Business:**

2705 CHATHAM CIRCLE  
KISSIMMEE, FL 34746 US

**New Principal Place of Business:**

2922 EVANS WAY  
KISSIMMEE, FL 34746 US

**Current Mailing Address:**

2705 CHATHAM CIRCLE  
KISSIMMEE, FL 34746 US

**New Mailing Address:**

2922 EVANS WAY  
KISSIMMEE, FL 34746 US

**FEI Number:** 75-3262099 **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:**

WG COMPUTER ACCOUNTING SERVICE  
728 SOUTH DILLARD ST  
WINTER GARDEN, FL 34787 US

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

PINERO, RAINA  
1102 MALCOM ROAD  
OCOOEE, FL 34761 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: RAINA PINERO

03/09/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RIDER, TIM  
Address: 2705 CHATHAM CIRCLE  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: RIDER, TIM  
Address: 2922 EVANS WAY  
City-St-Zip: KISSIMMEE, FL 34758 US

Title: MGR ( ) Change (X) Addition  
Name: RIDER, SANDRA  
Address: 2922 EVANS WAY  
City-St-Zip: KISSIMMEE, FL 34758 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: TIM RIDER

MGR

03/09/2009

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