

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000125291

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

**Entity Name:** ARMSTRONG RECOVERY SOLUTIONS, LLC

**Current Principal Place of Business:**

2006 NORTH HARBOUR DRIVE  
LYNN HAVEN, FL 32444 US

**New Principal Place of Business:**

1516 1/2 MICHIGAN AVE  
PANAMA CITY, FL 32401 US

**Current Mailing Address:**

2006 NORTH HARBOUR DRIVE  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

P.O. BOX 1340  
PANAMA CITY, FL 32402 US

**FEI Number:** 06-1832370      **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:**

O'FARRELL, ROB  
2006 NORTH HARBOUR DRIVE  
LYNN HAVEN, FL 32444 US

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

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: ROB O'FARRELL

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: OWNE ( ) Change (X) Addition  
Name: ARMSTRONG, PATTI  
Address: 1516 1/2 MICHIGAN AVE  
City-St-Zip: PANAMA CITY, FL 32401

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: PATTI ARMSTRONG

OWNE

11/21/2008

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