

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000010416

**FILED**  
**Jun 24, 2010**  
**Secretary of State**

**Entity Name:** TOTAL SITE AND RECOVERY SERVICES, LLC

**Current Principal Place of Business:**

425 BAY POINT WAY NORTH  
JACKSONVILLE, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

425 BAY POINT WAY NORTH  
JACKSONVILLE, FL 32259

**New Mailing Address:**

**FEI Number:** 26-1378002

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEPPERS, BOBBI R  
425 BAY POINT WAY NORTH  
JACKSONVILLE, FL 32259 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: BOBBI PEPPERS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PEPPERS, BOBBI R  
Address: 425 BAY POINT WAY N  
City-St-Zip: JACKSONVILLE, FL 32259

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: BOBBI PEPPERS

MGMR

06/24/2010

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