

# 2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000029223

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** FISKIES SEALCOATING & STRIPING L.L.C.

**Current Principal Place of Business:**

4317 FARRELL LANE  
ORLANDO, FL 32812

**New Principal Place of Business:**

818 CAPE COD CIRCLE  
VALRICO, FL 33594

**Current Mailing Address:**

4317 FARRELL LANE  
ORLANDO, FL 32812

**New Mailing Address:**

818 CAPE COD CIRCLE  
VALRICO, FL 33594

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**  
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:**

FISKE, JOSHUA  
4317 FARRELL LANE  
ORLANDO, FL 32812    US

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

FISKE, JOSHUA  
818 CAPE COD CIRCLE  
VALRICO, FL 33594    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: JOSHUA FISKE

04/26/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title:                      MGR  
Name:                     FISKE, JOSHUA  
Address:                 818 CAPE COD CIRCLE  
City-St-Zip:            VALRICO, FL 33594

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: JOSHUA FISKE

MGR

04/26/2010

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