

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000060173

**FILED**  
**Jan 17, 2010**  
**Secretary of State**

**Entity Name:** BULLIS FABRICATION LLC

**Current Principal Place of Business:**

1436 VALOR ST  
ORLANDO, FL 32810

**New Principal Place of Business:**

**Current Mailing Address:**

1436 VALOR ST  
ORLANDO, FL 32810

**New Mailing Address:**

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

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

BULLIS, SARAH  
4 WINDING RIDGE RD  
CASSELBERRY, FL 32707    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: SARAH BULLIS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BULLIS, GREG  
Address: 4 WINDING RIDGE RD  
City-St-Zip: CASSELBERRY, FL 32707

Title: MGRM  
Name: BULLIS, GLENN  
Address: 1436 VALOR ST  
City-St-Zip: ORLANDO, FL 32810

Title: MGRM  
Name: BULLIS, NANNETTE  
Address: 1436 VALOR ST  
City-St-Zip: ORLANDO, FL 32810

Title: MGRM  
Name: BULLIS, SARAH  
Address: 4 WINDING RIDGE RD  
City-St-Zip: CASSELBERRY, FL 32707

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: GREG BULLIS

MGRM

01/17/2010

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