2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 05, 2009
Secretary of State

DOCUMENT# L08000082781

Entity Name: PASCO LIQUIDATORS, LLC

Current Principal Place of Business:

1426-1428 US 19N
HOLIDAY, FL 34691 US

New Principal Place of Business:

Current Mailing Address:

1426-1428 US 19N
HOLIDAY, FL 34691 US

New Mailing Address:

31940 US HWY 19 NORTH
PALM HARBOR, FL 34684 US

FEI Number: 26-3275209 **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:

SIDLASKY, RICKY
1426-1428 US 19N
HOLIDAY, FL 34691 US

Name and Address of New Registered Agent:

JOHNSON, DANIEL
31940 US HWY 19 N.
PALM HARBOR, FL 34684 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: DANIEL JOHNSON 10/05/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DIFANTE, DOMENIC
Address: 1426-1428 US 19N
City-St-Zip: HOLIDAY, FL 34691 US

Title: MGRM ( ) Delete
Name: SIDLASKY, EDDIE
Address: 1426-1428 US 19N
City-St-Zip: HOLIDAY, FL 34691 US

Title: MGRM ( ) Delete
Name: ROBERTS, JEFF
Address: 1426-1428 US 19N
City-St-Zip: HOLIDAY, FL 34691 US

Title: MGRM ( ) Delete
Name: SIDLASKY, RICKY
Address: 1426-1428 US 19N
City-St-Zip: HOLIDAY, FL 34691 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DOMENIC DIFANTE MGM 10/05/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date