

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000087581

Entity Name: TRINITY FOLIAGE LLC

FILED  
Oct 01, 2009  
Secretary of State

## Current Principal Place of Business:

252 WEST ARDICE AVE  
#111  
EUSTIS, FL 32726

## Current Mailing Address:

252 WEST ARDICE AVE  
#111  
EUSTIS, FL 32726

## New Principal Place of Business:

252 WEST ARDICE AVE  
#121  
EUSTIS, FL 32726

## New Mailing Address:

252 WEST ARDICE AVE  
#121  
EUSTIS, FL 32726

FEI Number: 37-1573066      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:

VAN CULIN, ZEBULON P  
120 EAST SEMINOLE AVE  
EUSTIS, FL 32726 US

## Name and Address of New Registered Agent:

VAN CULIN, ZEBULON P  
110 IDLEWILD AVE  
C  
EUSTIS, FL 32726 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: ZEBULON VAN CULIN

10/01/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: VAN CULIN, ZEBULIN P  
Address: 252 WEST ARDICE AVE #111  
City-St-Zip: EUSTIS, FL 32726 US

Title: MGRM ( ) Delete  
Name: MCCURDY, ROBERT D  
Address: 29247 OLD MILL ROAD EAST  
City-St-Zip: TAVARES, FL 32778 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: VAN CULIN, ZEBULIN P  
Address: 252 WEST ARDICE AVE #121  
City-St-Zip: EUSTIS, FL 32726 US

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: ZEBULON VAN CULIN

MGRM

10/01/2009

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