

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000106971

Entity Name: PRECISION TOWING LLC

FILED  
Nov 07, 2009  
Secretary of State

**Current Principal Place of Business:**

1759 WEST NEW LENOX  
DUNNELLON, FL 34433

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 130  
DUNNELLON, FL 34430

**New Mailing Address:**

FEI Number: 26-4543172      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:**

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

GRYBKO, GREGORY A  
1759 WEST NEW LENOX  
DUNNELLON, FL 34433      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: GREGORY A GRYBKO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: GRYBKO, GREGORY A  
Address: 10131 NORTH COUNTRY CLUB WAY  
City-St-Zip: CITRUS SPRINGS, FL 34434

Title: MGR      ( ) Delete  
Name: GRYBKO, STEVE  
Address: 750 N.W. 217 COURT  
City-St-Zip: ROMEO, FL 34431

**ADDITIONS/CHANGES:**

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: GREGORY A GRYBKO

VP

11/07/2009

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