

# 2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000108298

**FILED**  
**Nov 04, 2014**  
**Secretary of State**

**Entity Name:** ALPHA DESIGN-N-CONSTRUCTION, LLC

**Current Principal Place of Business:**

36 JASPER THOMAS RD  
CRAWFORDVILLE, FL 32327

**New Principal Place of Business:**

3295 CRAWFORDVILLE HIGHWAY  
CRAWFORDVILLE, FL 32327

**Current Mailing Address:**

36 JASPER THOMAS RD  
CRAWFORDVILLE, FL 32327

**New Mailing Address:**

FEI Number: 26-3804022

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HOPE, VERNON D  
36 JASPER THOMAS ROAD  
CRAWFORDVILLE, FL 32327 US

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

HOPE, VERNON D II  
36 JASPER THOMAS ROAD  
CRAWFORDVILLE, FL 32327 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: VERNON D HOPE II

11/04/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: HOPE, VERNON D II  
Address: 36 JASPER THOMAS RD  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: P  
Name: HOPE, VERNON D II  
Address: 36 JASPER THOMAS RD  
City-St-Zip: CRAWFORDVILLE, FL 32327

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: VERNON D HOPE II

MR

11/04/2014

Electronic Signature of Authorized Person

Date