

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000004158

**Entity Name:** COUNTY PLUMBING, LLC

**FILED**  
**Oct 20, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2137 TAMIAMI TRAIL S.  
VENICE, FL 34293

**New Principal Place of Business:**

418 CENTRAL AVENUE  
SARASOTA, FL 34236

**Current Mailing Address:**

2137 TAMIAMI TRAIL S.  
VENICE, FL 34293

**New Mailing Address:**

PO BOX 355  
SARASOTA, FL 34230-035

**FEI Number:** 26-4049201

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HIGGINS, PAUL  
2137 TAMIAMI TRAIL S.  
VENICE, FL 34293 US

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

BYWATERS, CLYDE  
418 CENTRAL AVENUE  
SARASOTA, FL FL 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: CLYDE BYWATERS

10/20/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HIGGINS, PAUL M  
Address: 4444 SWIFT ROAD, #14  
City-St-Zip: SARASOTA, FL 34240

Title: MGRM  
Name: BYWATERS, CLYDE  
Address: PO BOX 355  
City-St-Zip: SARASOTA, FL 34230-035

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: CLYDE BYWATERS

VP

10/20/2010

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