

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000021909

FILED
Oct 03, 2011
Secretary of State

Entity Name: BA COMPRESSOR PROFESSOR, LLC

Current Principal Place of Business:

2020 NW 100 AVE
OCALA, FL 34482 US

New Principal Place of Business:

Current Mailing Address:

2020 NW 100 AVE
OCALA, FL 34482 US

New Mailing Address:

FEI Number: 26-4395149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AMERICAN SAFETY COUNCIL, INC.
5125 ADANSON ST.
SUITE 500
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

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: LAURA REGIER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MORIN, CARL
Address: 2020 NW 100 AVE
City-St-Zip: OCALA, FL 34482 US

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: CARL MORIN

MGRM

10/03/2011

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