

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000033609

**FILED**  
**Oct 03, 2011**  
**Secretary of State**

**Entity Name:** NORTHEAST FLORIDA INSPECTION SERVICE L.L.C.

**Current Principal Place of Business:**

3895 MAIN STREET  
MIDDLEBURG, FL 32068

**New Principal Place of Business:**

4413 JOHN CEMETERY RD  
MIDDLEBURG, FL 32068

**Current Mailing Address:**

3895 MAIN STREET  
MIDDLEBURG, FL 32068

**New Mailing Address:**

4413 JOHN CEMETERY RD  
MIDDLEBURG, FL 32068

**FEI Number:** 90-0483620

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EARLS, HORACE E III  
3895 MAIN STREET  
MIDDLEBURG, FL 32068 US

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

EARLS, HORACE E III  
4413 JOHN CEMETERY RD  
MIDDLEBURG, FL 32068 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: HORACE E EARLS

10/03/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: EARLS, HORACE E III  
Address: PO BOX 1  
City-St-Zip: MIDDLEBURG, FL 32050

Title: MGRM  
Name: EARLS, ROBIN A  
Address: PO BOX 1  
City-St-Zip: MIDDLEBURG, FL 32050

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: HORACE E EARLS LLL

MGRM

10/03/2011

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