

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000086830

**FILED**  
**Sep 23, 2011**  
**Secretary of State**

**Entity Name:** CALVIN'S RENOVATIONS LLC

**Current Principal Place of Business:**

7107 SANTA BARBARA  
PENSACOLA, FL 32526

**New Principal Place of Business:**

5343 MAVERICK LANE  
GULF BREEZE, FL 32563

**Current Mailing Address:**

7107 SANTA BARBARA  
PENSACOLA, FL 32526

**New Mailing Address:**

5343 MAVERICK LANE  
GULF BREEZE, FL 32563

**FEI Number:** 26-5610219

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOHANNON, CALVIN P  
7107 SANTA BARBARA  
PENSACOLA, FL 32526 US

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

BOHANNON, CALVIN P  
5343 MAVERICK LANE  
GULF BREEZE, FL 32563 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:** CALVIN P BOHANNON

09/23/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MR  
**Name:** BOHANNON, CALVIN P  
**Address:** 5343 MAVERICK LANE  
**City-St-Zip:** GULF BREEZE, FL 32563

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:** CALVIN P BOHANNON

MR

09/23/2011

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