

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000122424

Entity Name: BLUE RAY POOL CARE LLC

FILED
Nov 23, 2011
Secretary of State

Current Principal Place of Business:

5758 SE AVALON DR
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

PO BOX 786
PORT SALERNO, 34992

New Mailing Address:

PO BOX 786
PORT SALERNO, FL 34992

FEI Number: 80-0651826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHESANEK, CHRISTOPHER
57858 SE AVALON DR
STUART, FL 34997 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: CHRISTOPHER J CHESANEK

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: OWNE
Name: CHRISTOPHER, CHESANEK J
Address: 5758 SE AVALON DR
City-St-Zip: STUART, FL 34997

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: CHRISTOPHER J CHESANEK

OWNE

11/23/2011

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