

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000005317

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** PRO COUNTER TOP INSTALLERS LLC

**Current Principal Place of Business:**

221 W 20TH STREET  
APOPKA, FL 32703 US

**New Principal Place of Business:**

5330 FOXRIDGE TRL  
ORLANDO, FL 32818 US

**Current Mailing Address:**

221 W 20 STREET  
APOPKA, FL 32703 US

**New Mailing Address:**

5330 FOXRIDGE TRL  
ORLANDO, FL 32818 US

**FEI Number:** 27-1201578

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASIMIR, RANDY  
221 W 20TH STREET  
APOPKA, FL 32703 US

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

CASIMIR, RANDY  
5330 FOXRIDGE TRL  
ORLANDO, FL 32818 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: RCASIMIR

04/13/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CASIMIR, RANDY D  
Address: 5330 FOXRIDGE TRL  
City-St-Zip: ORLANDO, FL 32818 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: RCASIMIR

MR

04/13/2012

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