

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000081472

**FILED**  
**Oct 22, 2012**  
**Secretary of State**

**Entity Name:** DONNIE CUPPLES MARINE AND CONSTRUCTION LLC

**Current Principal Place of Business:**

DONNIE CUPPLES CO P CRYAR  
1069 BAY DR.  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

DONNIE CUPPLES CO P CRYAR  
126 BUCK RD  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

DONNIE CUPPLES CO P CRYAR  
1069 BAY DR.  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

DONNIE CUPPLES CO P CRYAR  
126 BUCK RD  
SANTA ROSA BEACH, FL 32459

**FEI Number:** 90-0596053

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CUPPLES, DONNIE L  
1069 BAY DR  
SANTA ROSA BEACH, FL 32459 US

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

CUPPLES, DONNIE L  
126 BUCK RD  
SANTA ROSA BEACH, FL 32459 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: DONNIE CUPPLES

10/22/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR  
Name: DONNIE, CUPPLES L  
Address: 3060 N. LAZY EIGHT VT.3-232  
City-St-Zip: WASILLA, AK 99687

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: DONNIE CUPPLES

OWNE

10/22/2012

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