

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000094520

**FILED**  
**Jul 30, 2014**  
**Secretary of State**

**Entity Name:** CUTTING EDGE GLASS AND MIRROR LLC

**Current Principal Place of Business:**

540 NORTH HIGHWAY 434  
74  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

540 N. STATE ROAD 434  
74  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

540 GEORGIA AVE  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

540 N. STATE ROAD 434  
74  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:** 90-0609827

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FIUMARA, FRANK P  
540 GEORGIA AVE  
ALTAMONTE SPRINGS, FL 32714 US

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

FIUMARA, FRANK P  
540 N. STATE ROAD 434  
74  
ALTAMONTE SPRINGS, FL 32714 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: FRANK P FIUMARA

07/30/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MNGR  
Name: FIUMARA, FRANK P SR  
Address: 540 N. STATE ROAD 434  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: FRANK P FIUMARA

MNGR

07/30/2014

Electronic Signature of Authorized Person

Date