

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000107433

**FILED**  
**Sep 07, 2012**  
**Secretary of State**

**Entity Name:** T & D HOME SERVICES LLC

**Current Principal Place of Business:**

18308 ORIOLE ROAD  
FT. MYERS, FL 33967 US

**New Principal Place of Business:**

**Current Mailing Address:**

18308 ORIOLE ROAD  
FT. MYERS, FL 33967 US

**New Mailing Address:**

**FEI Number:** 36-4690083

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOWRANCE, DONNA  
18308 ORIOLE ROAD  
FT. MYERS, FL 33967 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:** DONNA LOWRANCE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LOWRANCE, DONNA  
**Address:** 18308 ORIOLE ROAD  
**City-St-Zip:** FT. MYERS, FL 33967 US

**Title:** MGRM  
**Name:** LOWRANCE, TIM  
**Address:** 18308 ORIOLE ROAD  
**City-St-Zip:** FT. MYERS, FL 33967 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:** DONNA LOWRANCE

MGRM

09/07/2012

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