

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000116369

**FILED**  
**Oct 03, 2013**  
**Secretary of State**

**Entity Name:** JOSHUA FLOOR TECHNICIAN, LLC

**Current Principal Place of Business:**

4065 EDGEWATER DR  
APT D  
ORLANDO, FL 3280E

**New Principal Place of Business:**

2820 LAKE ARNOLD PLACE  
ORLANDO, FL 32806

**Current Mailing Address:**

4065 EDGEWATER DR  
APT D  
ORLANDO, FL 3280E

**New Mailing Address:**

2820 LAKE ARNOLD PLACE  
ORLANDO, FL 32806

**FEI Number:** 27-3917061

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ALVAREZ, YURIDIA  
4065 EDGEWATER DR APT D  
ORLANDO, FL 32804 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:** YURIDIA ALVAREZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** ALVAREZ, YURIDIA L  
**Address:** 2820 LAKE ARNOLD PLACE  
**City-St-Zip:** ORLANDO, FL 32806

**Title:** MGRM  
**Name:** MENDOZA, JOSUE  
**Address:** 4065 EDGEWATER DR APT D  
**City-St-Zip:** ORLANDO, FL 32804

**Title:** MGRM  
**Name:** MENDOZA, ELISEO  
**Address:** 4065 EDGEWATER DR APT D  
**City-St-Zip:** ORLANDO, FL 32804

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:** YURIDIA ALVAREZ

MGRM

10/03/2013

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