

# 2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000011792

**FILED**  
**Feb 24, 2013**  
**Secretary of State**

**Entity Name:** TREMPE INSTALLATIONS LLC

**Current Principal Place of Business:**

1861 SW SAINT GEORGE ST  
STUART FLA, FL 34997

**New Principal Place of Business:**

835 NE DIXIE HWY  
JENSEN BEACH, FL 34957

**Current Mailing Address:**

1861 SW SAINT GEORGE ST  
STUART FLA, FL 34997

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired (X)**

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

ALBERTSON, EDWARD D  
1802 SW ST GEORGE ST  
STUART, FL 34997    US

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

TREMPE, PAUL SR.  
835 NE DIXIE HWY  
JENSEN BEACH, FL 34957    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: PAUL TREMPE SR.

02/24/2013

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: TREMPE, PAUL J SR  
Address: 1861 SW ST GEORGE ST  
City-St-Zip: STUART, FL 34997

Title: MGRM  
Name: ALBERTSON, EDWARD D  
Address: 1802 SW ST GEORGE ST  
City-St-Zip: STUART, FL 34997

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: PAUL TREMPE SR.

MGR

02/24/2013

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