

# 2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000049907

**FILED**  
**Jan 02, 2013**  
**Secretary of State**

**Entity Name:** FLORIDA AGGREGATE SALES & TRANSPORT LLC

**Current Principal Place of Business:**

1197 PINE AVENUE  
FROSTPROOF, FL 33843

**New Principal Place of Business:**

**Current Mailing Address:**

1197 PINE AVENUE  
FROSTPROOF, FL 33843

**New Mailing Address:**

**FEI Number:** 36-4696797

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EWING, FLOYD  
1197 PINE AVENUE  
FROSTPROOF, FL 33843 US

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

EWING, JAALA  
1197 PINE AVENUE  
FROSTPROOF, FL 33843 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: JAALA EWING

01/02/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: EWING, JAALA  
Address: 1197 PINE AVENUE  
City-St-Zip: FROSTPROOF, FL 33843

Title: MGRM  
Name: EWING, FLOYD  
Address: 1197 PINE AVENUE  
City-St-Zip: FROSTPROOF, FL 33843

Title: MGRM  
Name: EWING, JERAD  
Address: 1197 PINE AVENUE  
City-St-Zip: FROSTPROOF, FL 33843

Title: MGRM  
Name: EWING, DONNA  
Address: 1197 PINE AVENUE  
City-St-Zip: FROSTPROOF, FL 33843

Title: MGRM  
Name: EWING, JENNIFER  
Address: 1197 PINE AVENUE  
City-St-Zip: FROSTPROOF, FL 33843

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: JAALA EWING

MGRM

01/02/2013

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