

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000071470

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

**Entity Name:** GARY FITTS CONSTRUCTION PLLC

**Current Principal Place of Business:**

268 SAGECREST DRIVE  
OCOE, FL 34761 US

**New Principal Place of Business:**

**Current Mailing Address:**

268 SAGECREST DRIVE  
OCOE, FL 34761 US

**New Mailing Address:**

**FEI Number:** 45-2590418

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FITTS, GARY L  
268 SAGECREST DRIVE  
OCOE, FL 34761 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:** GARY FITTS

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** FITTS, GARY L  
**Address:** 268 SAGECREST DRIVE  
**City-St-Zip:** OCOE, FL 34761 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:** GARY FITTS

MGRM

10/03/2013

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