

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000121785

**FILED**  
**Feb 22, 2013**  
**Secretary of State**

**Entity Name:** DAVIS EXCAVATOR SERVICES LLC

**Current Principal Place of Business:**

1863 W. 6TH STREET  
JACKSONVILLE, FL 32209 US

**New Principal Place of Business:**

**Current Mailing Address:**

1863 W. 6TH STREET  
JACKSONVILLE, FL 32209 US

**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:**

DAVIS, LINWOOD  
1863 W. 6TH STREET  
JACKSONVILLE, FL 32209 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: LINWOOD DAVIS

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DAVIS, LINWOOD  
Address: POB 37488  
City-St-Zip: JACKSONVILLE, FL 32236 US

Title: MGRM  
Name: DAVIS, LINWOOD JR.  
Address: POB 37488  
City-St-Zip: JACKSONVILLE, FL 32236 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: LINWOOD DAVIS

MGRM

02/22/2013

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