



2014 LIMITED LIABILITY COMPANY REINSTATEMENT

ATTACHED
AND
FILED

14 SEP 30 PM 12:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L11000139245					
1. Entity Name GOLDEN PLASTERING LLC					
Principal Place of Business 6363 S. WINDWOOD HILLS TALLAHASSEE, FL 32311			Mailing Address 6363 S. WINDWOOD HILLS TALLAHASSEE, FL 32311		
2. Principal Place of Business - No P.O. Box # 5525 Springhill Rd <small>Suite, Apt. #, etc.</small>		3. Mailing Address 5525 Springhill Rd <small>Suite, Apt. #, etc.</small>			
City & State Tallahassee FL		City & State Tallahassee FL			
Zip 32305		Country Leon			
City & State Tallahassee FL		City & State Tallahassee FL			
4. FEI Number				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent KEEL, LASHELLE 58 SIOUX CIRCLE HAVANA, FL 32333			7. Name and Address of New Registered Agent Name: <u>Gregory Golden</u> Street Address (P.O. Box Number is Not Acceptable): 5525 Springhill Rd City: <u>Tallahassee</u> FL Zip Code: <u>32305</u>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <u>Gregory Golden</u> <small>Signature, typed or printed name of registered agent and title if applicable</small>				DATE: <u>9-30-14</u>	
FILE NOW!!! FEE IS \$238.75 After January 1, 2015, Fee will be \$377.50				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GOLDEN, GREG 6363 S. WINDWOOD HILLS TALLAHASSEE, FL 32311		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Golden, Greg 5525 Springhill Rd Tallahassee, FL 32305	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GOLDEN, DARLENE 6363 S. WINDWOOD HILLS TALLAHASSEE, FL 32311		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Golden, Darlene 5525 Springhill Rd Tallahassee, FL 32305	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP		700264838527 09/30/14--01009--024 **238.75		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>Gregory Golden</u>				DATE: <u>9-30-14</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				<small>E-MAIL ADDRESS</small>	

K. ASHTON