

# 2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L12000005445

FILED  
Oct 23, 2014  
Secretary of State

**Entity Name:** ANDREW LEAL PAINTING & RESTORATION LLC

**Current Principal Place of Business:**

7524 SOUTHPOINTE PL.  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

7524 SOUTHPOINTE PL.  
PENSACOLA, FL 32514

**New Mailing Address:**

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

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

LEAL, MICHAEL ANDREW  
7524 SOUTHPOINTE PL.  
PENSACOLA, FL 32514    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: MICHAEL ANDREW LEAL

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

\_\_\_\_\_  
Date

**AUTHORIZED PERSONS:**

Title:                      MGRM  
Name:                     LEAL, MICHAEL  
Address:                 7524 SOUTHPOINTE PL.  
City-St-Zip:            PENSACOLA, FL 32514

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: MICHAEL ANDREW LEAL

\_\_\_\_\_  
Electronic Signature of Authorized Person

MGR

10/23/2014

\_\_\_\_\_  
Date