

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000107334

**FILED**  
**Sep 29, 2014**  
**Secretary of State**

**Entity Name:** EAGLES CONTRACTING SERVICE," L.L.C."

**Current Principal Place of Business:**

642 ALPINE STREET  
ALTAMONTE SPRING, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

642 ALPINE STREET  
ALTAMONTE SPRING, FL 32701

**New Mailing Address:**

**FEI Number:** 46-0850089

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIAZ, MILDRED  
642 ALPINE STREET  
ALTAMONTE SPRING, FL 32701 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:** MILDRED DIAZ

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

\_\_\_\_\_  
Date

**AUTHORIZED PERSONS:**

**Title:** MGRM  
**Name:** MILDRED, DIAZ  
**Address:** 642 ALPINE STREET  
**City-St-Zip:** ALTAMONTE SPRING, FL 32701

**Title:** MGR  
**Name:** DIAZ, DANIEL  
**Address:** 642 ALPINE ST  
**City-St-Zip:** ALTAMONTE SPRING, FL 32701

**Title:** MGR  
**Name:** BYER, JOHANN  
**Address:** 644 ALPINE ST  
**City-St-Zip:** ALTAMONTE SPRING, FL 32701

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:** MILDRED DIAZ

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

MGRM

09/29/2014

\_\_\_\_\_  
Date