

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000153231

**FILED**  
**Oct 22, 2014**  
**Secretary of State**

**Entity Name:** GREENE'S TEAM HOME REPAIR, LLC

**Current Principal Place of Business:**

846 WYOLEN STREET  
JACKSONVILLE, FL 32254

**New Principal Place of Business:**

**Current Mailing Address:**

846 WYOLEN STREET  
JACKSONVILLE, FL 32254

**New Mailing Address:**

3820 BESSENT ROAD  
JACKSONVILLE, FL 32218

**FEI Number:** 90-0915200

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COUNTRYMAN, VIRGINIA G  
7529 COVEWOOD DRIVE  
JACKSONVILLE, FL 32256 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:** VIRGINIA G. COUNTRYMAN

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

**Title:** MGR  
**Name:** GREENE, SYLVESTER  
**Address:** 3820 BESSENT ROAD  
**City-St-Zip:** JACKSONVILLE, FL 32218

**Title:** MGR  
**Name:** GREENE, ERICKA L  
**Address:** 1446 W. STATE STREET  
**City-St-Zip:** JACKSONVILLE, FL 32209

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:** ERICKA GREENE

MGR

10/22/2014

Electronic Signature of Authorized Person

Date