

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M03000003554

FILED
Oct 25, 2004
Secretary of State

Entity Name: DENVER EQUIPMENT COMPANY, LLC

Current Principal Place of Business:

6110-2 POWERS AVENUE
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

6110-2 POWERS AVENUE
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 02-0701469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ERWIN, CHARLES B
Address: POST OFFICE BOX 10386
City-St-Zip: GREENSBORO, NC 27404

Title: MGR () Delete
Name: MCRAE, CAMERON W
Address: POST OFFICE BOX 277
City-St-Zip: KINSTON, NC 28502

Title: MGR (X) Delete
Name: ROTH, ED
Address: 6110-2 POWERS AVENUE
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LANGHAM, CLINTON S
Address: POST OFFICE BOX 340
City-St-Zip: DENVER, NC 28037

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: C. SCOTT LANGHAM

MGR

10/25/2004

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