

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M05000001491

FILED
Nov 02, 2006
Secretary of State

Entity Name: STRUCTURAL SOLUTIONS, L.L.C.

Current Principal Place of Business:

201 S. PERKINS ST.
RIDGELAND, MS 39157

New Principal Place of Business:

29626 SR 54
WESLEY CHAPLE, FL 33543

Current Mailing Address:

201 S. PERKINS ST.
RIDGELAND, MS 39157

New Mailing Address:

29626 SR 54
WESLEY CHAPLE, FL 33543

FEI Number: 43-2009553 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BUSINESS SUPPORT, INC.
417 STOWE AVE. SUITE Z
ORANGE PARK, FL 32073 US

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: BOBBY LEE HESKETT

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: KIGHT, ROBIE
Address: 201 S. PERKINS ST.
City-St-Zip: RIDGELAND, MS 39157

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

Title: MGRM () Delete
Name: CHVWN, MACK
Address: 201 S. PERKINS ST.
City-St-Zip: RIDGELAND, MS 39157

Title: MGRM (X) Change () Addition
Name: CHUNN, MACK
Address: 201 S. PERKINS ST.
City-St-Zip: RIDGELAND, MS 39157

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BOBBY LEE HESKETT

MGR

11/02/2006

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