

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P11000073886

**FILED**  
**Feb 13, 2014**  
**Secretary of State**

**Entity Name:** SOUTHERN PLUMBING SOLUTIONS, INC.

**Current Principal Place of Business:**

4668 LITTLE RIVER LANE  
FORT MYERS, FL 33905

**New Principal Place of Business:**

216 WALDO AVENUE NORTH  
UNIT 7  
FORT MYERS, FL 33971

**Current Mailing Address:**

PO BOX 50218  
FORT MYERS, FL 33994

**New Mailing Address:**

216 WALDO AVENUE NORTH  
UNIT 7  
FORT MYERS, FL 33971

**FEI Number:** 45-3036875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SMITH SMITH & ASSOCIATES INC  
6314 WHISKEY CREEK DR  
B  
FORT MYERS, FL 33919 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: NOLA HOUCK

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P,D  
Name: HOUCK, NOLA  
Address: 4668 LITTLE RIVER LANE  
City-St-Zip: FORT MYERS, FL 33905

Title: VP  
Name: HOUCK, RICHARD  
Address: 4668 LITTLE RIVER LANE  
City-St-Zip: FORT MYERS, FL 33905

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NOLA HOUCK

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

02/13/2014

\_\_\_\_\_  
Date