

2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000131809

Entity Name: BRANCH RECONSTRUCTION, LLC

Current Principal Place of Business:

5553 W WATERS AVENUE, SUITE 312
TAMPA, FL 33634

Current Mailing Address:

5553 W WATERS AVENUE, SUITE 312
TAMPA, FL 33634 US

FEI Number: 45-3843324

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUTLER, TIMOTHY
4320 SPINNAKER COVE LANE
TAMPA, FL 33615 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: TIMOTHY BUTLER

10/28/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name BUTLER, TIMOTHY P
Address 4320 SPINNAKER COVE LANE
City-State-Zip: TAMPA FL 33615

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TIMOTHY BUTLER

PRESIDENT

10/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date