## 2019 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 12719 FOREST STREET TAMPA, FL 33617 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 10/07/2019

Electronic Signature of Registered Agent

Date

FILED Oct 07, 2019

**Secretary of State** 

4404392181CR

Authorized Person(s) Detail:

Title MGR

Name BUTLER, TIMOTHY P

Address 5553 W WATERS AVENUE, SUITE 312

City-State-Zip: TAMPA FL 33634

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 PRESIDE

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT

10/07/2019

Date