

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L14000122181

**Entity Name:** SHAMROCK HOME INSPECTION LLC

**Current Principal Place of Business:**

435 PLOVER DR.  
NONE  
MICCO, FL 32976

**Current Mailing Address:**

435 PLOVER DR.  
NONE  
MICCO, FL 32976 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

WELCH, JAMES J  
435 PLOVER DR.  
NONE  
MICCO, FL 32976 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:** JAMES J WELCH

10/01/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name WELCH, JAMES J  
Address 435 PLOVER DR.  
City-State-Zip: MICCO FL 32976

*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:** JAMES J WELCH

MANAGER

10/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date