

**2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L20000310388

**Entity Name:** TOP FLIGHT PAVERS LLC

**Current Principal Place of Business:**

4040 GROBE STREET  
NORTH PORT, FL 34287

**Current Mailing Address:**

4040 GROBE STREET  
NORTH PORT, FL 34287 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

TOP FLIGHT PAVERS & RESTORATION  
4040 GROBE STREET  
NORTH PORT, FL 34287 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:** NICHILOUS PATRICK PARVU

10/14/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            PARVU, NICHILOUS P  
Address        4040 GROBE STREET  
City-State-Zip: NORTH PORT FL 34287

*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:** NICHILOUS PATRICK PARVU

OWNER

10/14/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date