

# 2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000072243

**FILED**  
**Dec 13, 2011**  
**Secretary of State**

**Entity Name:** PRS SERVICES, LLC

**Current Principal Place of Business:**

% SHARON C BRANNAN CPA PA  
161 N MAIN ST  
WILLISTON, FL 32696 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 359  
GAINESVILLE, FL 32602 US

**New Mailing Address:**

P O BOX 140213  
GAINESVILLE, FL 32614 US

**FEI Number:** 20-3187007

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHARON C BRANNAN CPA PA  
161 N MAIN STREET  
WILLISTON, FL 32696 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: PAUL R SHOE

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SHOE, PAUL R  
Address: P O BOX 359  
City-St-Zip: GAINESVILLE, FL 32602 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: PAUL R SHOE

CEO

12/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date