

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000008168

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** AARON JOHNS YEAR-ROUND LAWNCARE, L.L.C.

**Current Principal Place of Business:**

833 NW LOWER SPRINGS RD  
LAKE CITY, FL 32055

**New Principal Place of Business:**

**Current Mailing Address:**

833 NW LOWER SPRINGS RD  
LAKE CITY, FL 32055

**New Mailing Address:**

**FEI Number:** 56-2634717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNS, JOSEPH A  
833 NW LOWER SPRINGS RD  
LAKE CITY, FL 32055 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:** JOSEPH AARON JOHNS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** JOHNS, JOSEPH A  
**Address:** 833 NW LOWER SPRINGS RD  
**City-St-Zip:** LAKE CITY, FL 32055

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:** JOSEPH AARON JOHNS

MGRM

04/29/2012

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