

# 2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000010802

**FILED**  
**Jan 10, 2013**  
**Secretary of State**

**Entity Name:** ADMINISTRATIVE ASSISTANTS OF JACKSONVILLE, LLC

**Current Principal Place of Business:**

4127 SAN BERNADO DR  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

3753 HILLIARD ROAD  
JACKSONVILLE, FL 32217

**Current Mailing Address:**

4127 SAN BERNADO DR  
JACKSONVILLE, FL 32217

**New Mailing Address:**

3753 HILLIARD ROAD  
JACKSONVILLE, FL 32217

FEI Number: 20-8346502

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THE ARNOLD LAW FIRM, LLC  
6279 DUPONT STATION COURT  
JACKSONVILLE, FL 32204 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: SHAWN A. ARNOLD

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ARNOLD, JEFFREY B  
Address: 3753 HILLIARD ROAD  
City-St-Zip: JACKSONVILLE, FL 32217

Title: MGRM  
Name: ARNOLD, SHARON  
Address: 3753 HILLIARD ROAD  
City-St-Zip: JACKSONVILLE, FL 32217

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: JEFFREY B. ARNOLD

MGR

01/10/2013

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