

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000120297

**FILED**  
**Apr 07, 2014**  
**Secretary of State**

**Entity Name:** CAPOEIRA ACADEMY OF GAINESVILLE LLC

**Current Principal Place of Business:**

706 SW 16TH AVE.  
203  
GAINESVILLE, FL 32601 US

**New Principal Place of Business:**

1717NE 9TH ST  
GAINESVILLE, FL 32609 US

**Current Mailing Address:**

706 SW 16TH AVE.  
203  
GAINESVILLE, FL 32601 US

**New Mailing Address:**

4024 NW 20TH TER  
GAINESVILLE, FL 32605 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

DAVIS, JEFFREY A  
706 SW 16TH AVE.  
203  
GAINESVILLE, FL 32601 US

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

DAVIS, JEFFREY A  
4024 NW 20TH TER  
GAINESVILLE, FL 32605 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: JEFFREY DAVIS

04/07/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: DAVIS, JEFFREY A  
Address: 4024 NW 20TH TER  
City-St-Zip: GAINESVILLE, FL 32605 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: JEFFREY DAVIS

MGRM

04/07/2014

Electronic Signature of Authorized Person

Date