

# 2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000062685

**FILED**  
**Sep 29, 2011**  
**Secretary of State**

**Entity Name:** AMA LIMITED CO.

**Current Principal Place of Business:**

3443 PINE RIDGE ROAD  
NAPLES, FL 34109

**New Principal Place of Business:**

7051 HUNTERS RD.  
NAPLES, FL 34109

**Current Mailing Address:**

3443 PINE RIDGE ROAD  
NAPLES, FL 34109

**New Mailing Address:**

7051 HUNTERS RD.  
NAPLES, FL 34109

FEI Number: 72-1618381

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

NOVATT, JEFF M ESQ.  
821 FIFTH AVENUE SOUTH  
SUITE 201  
NAPLES, FL 34102 US

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

SOLOMON, GENE R CPA  
1342 COLONIAL BLVD.  
SUITE B-11  
FORT MYERS, FL 33907 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: GENE R SOLOMON

09/29/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ALICE, MEIR  
Address: 7051 HUNTERS RD.  
City-St-Zip: NAPLES, FL 34109

Title: MGRM  
Name: ALIAS, AVIEL  
Address: 7051 HUNTERS RD.  
City-St-Zip: NAPLES, FL 34109

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: MEIR ALICE

MGRM

09/29/2011

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