## 2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000056364

Entity Name: BASIC PRODUCTS LLC.

**Current Principal Place of Business:** 

1551 WEST EDGEWOOD AVE JACKSONVILLE, FL 32208

**Current Mailing Address:** 

4446 HENDRICKS AVE

345

JACKSONVILLE, FL 32207

FEI Number: 45-2420642 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, JOANN M 1551 WEST EDGEWOOD AVE JACKSONVILLE, FL 32208 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: JOANN BROWN 10/18/2017

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name BROWN, JOANN M Name BROWN, KATRINA

Address 1551 WEST EDGEWOOD AVE Address 1551 WEST EDGEWOOD AVE City-State-Zip: JACKSONVILLE FL 32208 City-State-Zip: JACKSONVILLE FL 32208

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOANN BROWN

MANAGING MEMBER

10/18/2017

FILED Oct 18, 2017

**Secretary of State** 

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