

**2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000056681

**FILED  
Mar 21, 2017  
Secretary of State  
CR3128213723**

**Entity Name:** SHACKELFORD MANAGEMENT LLC

**Current Principal Place of Business:**

603 MARTIN LUTHER KING DR.  
CHIPLEY, FL 32428

**Current Mailing Address:**

603 MARTIN LUTHER KING DR.  
CHIPLEY, FL 32428

**FEI Number: 80-0900772**

**Certificate of Status Desired: Yes**

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

BELL, SAMUEL E  
603 MARTIN LUTHER KING DR.  
CHIPLEY, FL 32428 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: SAMUEL BELL**

**03/21/2017**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name BELL, SAMUEL E  
Address 603 MARTIN LUTHER KING DRIVE  
City-State-Zip: CHIPLEY FL 32428

Title MGRM  
Name BELL, MARTHA R  
Address 90 METROPOLITAN DRIVE  
City-State-Zip: ROCHESTER NY 14620

Title MGRM  
Name BELL, NICHELLE  
Address 126 BELMONTE DRIVE  
City-State-Zip: ATLANTA GA 30311

*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: SAMUEL BELL**

**MANAGER**

**03/21/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date