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: MARY LOUISE FYLSTRA

Electronic Signature of Signing Authorized Person(s) Detail

OFFICE MGR.

03/07/2017

2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L14000021062

Entity Name: GENESIS OF FL LIMITED LIABILITY COMPANY

Current Principal Place of Business:

C/O 9240 BONITA BEACH RD 2206 BONITA SPRINGS, FL 34135

Current Mailing Address:

12050 SUMMERGATE CIR C-102 FORT MYERS, FL 33913 US

FEI Number: 46-4738361

Name and Address of Current Registered Agent:

LA CROIX, MINDY 12050 SUMMERGATE CIR C-102 FORT MYERS, FL 33913 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	MINDY LA CROIX			03/07/2017
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	AR	
Name	ALLIGATOR BIGHT, INC.	Name	FYLSTRA, MARY LOU	
Address	C/O 9240 BONITA BEACH RD, STE 2206	Address	C/O 9240 BONITA BEACH RD, S 2206	STE
City-State-Zip:	BONITA SPRINGS FL 34135	City-State-Zip:	BONITA SPRINGS FL 34135	

Certificate of Status Desired: No

FILED Mar 07, 2017 Secretary of State CR8729697147

Date