# 2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L16000070338

Entity Name: ABI LOCKSMITH

#### **Current Principal Place of Business:**

4585 CAPITAL DOME DR JACKSONVILLE, FL 32246

# **Current Mailing Address:**

4585 CAPITAL DOME DR JACKSONVILLE, FL 32246

### FEI Number: 81-2893356

# Name and Address of Current Registered Agent:

GELBSTAINE, CHAIM Y 4585 CAPITAL DOME DR JACKSONVILLE, FL 32246 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: CHAIM GELBSTAINE

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title	MGR
Name	LEVIN-GELBSTAINE, STERNA
Address	4585 CAPITAL DOME DR
City-State-Zip:	JACKSONVILLE FL 32246

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: LEVIN-GELBSTAINE, STERNA

PARTNER

10/21/2018 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Oct 21, 2018 Secretary of State CR0785838103

Certificate of Status Desired: No

10/21/2018

Date