

**2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L16000099983

**Entity Name:** REEL REVENGE LLC

**Current Principal Place of Business:**

3712 SW 12TH AVE.  
CAPE CORAL, FL 33914

**Current Mailing Address:**

3712 SW 12TH AVE.  
CAPE CORAL, FL 33914 US

**FEI Number:** 81-2757641

**Certificate of Status Desired:** No

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

GAGNON, BRYAN D  
3712 SW 12TH AVE.  
CAPE CORAL, FL 33914 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:** BRYAN D GAGNON

10/18/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            GAGNON, BRYAN  
Address        3712 SW 12TH AVE.  
City-State-Zip: CAPE CORAL FL 33914

*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:** BRYAN GAGNON

AMBR

10/18/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date