

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

**FILED**

2002 OCT 25 AM 11:05

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

DOCUMENT # L01000004871

1. Limited Liability Company's Name

AFS, LLC

2. Principal Office Address

8323 Ramona Blvd.

Suite, Apt. #, etc.

3. Mailing Office Address

8323 Ramona Blvd.

Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Jacksonville, FL

Zip

32221

Country

Duval

Zip

32221

Country

Duval

4. State/Country of Formation

5. Date Organized or Qualified  
To Do Business in Florida

4/1/2001

6. FEI Number

59-3708759

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required  
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Ronald W. Fussell

Street Address (P.O. Box Number is Not Acceptable)

8323 Ramona Blvd.

Suite, Apt. #, Etc.

City

Jacksonville, FL 32221

State

FL

Zip Code

32221

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of  
Registered Agent

Ronald W. Fussell

REGISTERED AGENT MUST SIGN

Date

10/23/02

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Ronald W. Fussell	8323 Ramona Blvd.	Jacksonville, FL 32221

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of  
Managing Member/Manager

Ronald W. Fussell

Date

10/23/02

Daytime Phone #

904-378-8098

Typed or printed name of signing Managing Member/Manager

Ronald W. Fussell