

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L01000010294

**FILED**  
**Oct 27, 2011**  
**Secretary of State**

**Entity Name:** ERROL MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

1355 ERROL PARKWAY  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

1355 ERROL PARKWAY  
APOPKA, FL 32712

**New Mailing Address:**

**FEI Number:** 59-3726712

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOWMAN, WILLIAM R JR ESQ  
1000 LEGION PLACE  
SUITE 1700  
ORLANDO, FL 32801 US

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

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:** WILLIAM R. LOWMAN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** CASS, ROBERT  
**Address:** 1598 GOLFSIDE VILLAGE BLVD.  
**City-St-Zip:** APOPKA, FL 32712

**Title:** MGRM  
**Name:** KLEIN, JULIAN  
**Address:** 1583 CHAMPIONSHIP CT  
**City-St-Zip:** APOPKA, FL 32712

**Title:** MGRM  
**Name:** LORETAN, JACK  
**Address:** 1252 GREEN VISTA CIRCLE  
**City-St-Zip:** APOPKA, FL 32712

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** MICHAEL J. ROBINSON

GM

10/27/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date