

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L01000015536

Entity Name: JEXENDA, L.L.C.

**FILED**  
**Nov 15, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

13637 MARSH HARBOR DRIVE NORTH  
JACKSONVILLE, FL 32255

**New Principal Place of Business:**

13637 MARSH HARBOR DRIVE NORTH  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

P.O. BOX 551260  
JACKSONVILLE, FL 32255

**New Mailing Address:**

13637 MARSH HARBOR DRIVE NORTH  
JACKSONVILLE, FL 32225

FEI Number: 59-3747965

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBIN, ROBERTS K  
625 W UNION STREET 2  
JACKSONVILLE, FL 32202 US

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

CAIN, ROGERS  
9390 LEM TURNER ROAD  
JACKSONVILLE, FL 32208 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: ROGERS CAIN

11/15/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CAIN, ROGERS  
Address: 13637 MARSH HARBOR DRIVE N  
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM  
Name: CAIN, BRENDA  
Address: 13637 MARSH HARBOR DRIVE N  
City-St-Zip: JACKSONVILLE, FL 32225

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: ROGERS CAIN

MGR

11/15/2012

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