

**2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L02000000226

**FILED  
Sep 26, 2011  
Secretary of State**

**Entity Name:** DRAWDY INSURANCE SERVICES L.L.C.

**Current Principal Place of Business:**

738 SW MAIN BLVD.  
LAKE CITY, FL 32025

**New Principal Place of Business:**

**Current Mailing Address:**

738 SW MAIN BLVD.  
LAKE CITY, FL 32025

**New Mailing Address:**

**FEI Number:** 59-3655970      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DRAWDY, J. BRUCE  
540 SW SAN JUAN PL  
LAKE CITY, FL 32025      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: J. BRUCE DRAWDY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** PRES  
**Name:** DRAWDY, J. BRUCE  
**Address:** 540 SW SAN JUAN PL  
**City-St-Zip:** LAKE CITY, FL 32025

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: J. BRUCE DRAWDY

PRES

09/26/2011

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