

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000000947

**FILED**  
**Oct 13, 2005**  
**Secretary of State**

**Entity Name:** TIBBITS LAND LLC

**Current Principal Place of Business:**

7818 U.S. HIGHWAY 301 SOUTH  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

7818 U.S. HIGHWAY 301 SOUTH  
RIVERVIEW, FL 33569

**New Mailing Address:**

**FEI Number:** 20-0910318      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

LASMAN, JEFFREY M  
OWENS LAW GROUP, P.A  
811-B CYPRESS VILLAGE BOULEVARD  
RUSKIN, FL 33573 US

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

LASMAN, JEFFREY M  
LASMAN LAW FIRM, P.A  
6152 DELANCEY STATION STREET  
RIVERVIEW, FL 33569 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: JEFFREY M. LASMAN

10/13/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: TIBBITS, DOUGLAS B  
Address: 7818 U.S. HIGHWAY 301 SOUTH  
City-St-Zip: RIVERVIEW, FL 33569

Title: MGRM ( ) Delete  
Name: TIBBITS, KATHLEEN O  
Address: 7818 U.S. HIGHWAY 301 SOUTH  
City-St-Zip: RIVERVIEW, FL 33569

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: JEFFREY M. LASMAN

RA

10/13/2005

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