

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000023183

**FILED**  
**Oct 09, 2014**  
**Secretary of State**

**Entity Name:** THE MEADOWS AT CYPRESS GARDENS, L.L.C.

**Current Principal Place of Business:**

3050 WOODMONT AVENUE  
WINTER HAVEN, FL 33884

**New Principal Place of Business:**

**Current Mailing Address:**

3050 WOODMONT AVENUE  
WINTER HAVEN, FL 33884

**New Mailing Address:**

**FEI Number:** 20-0057088

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASTLEBERG, BENJAMIN  
141 EAST CENTRAL AVENUE  
SUITE 300  
WINTER HAVEN, FL 33884 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: BEN CASTLEBERG

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: CASTLEBERG, BENJAMIN  
Address: 141 E. CNTRL AVE. STE 300  
City-St-Zip: WINTER HAVEN, FL 33880

Title: MEM  
Name: CASTLEBERG, PHILIP  
Address: 141 E. CNTRL AVE STE 300  
City-St-Zip: WINTER HAVEN, FL 33880

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: BEN CASTLEBERG

MGR

10/09/2014

Electronic Signature of Authorized Person

Date