

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000015823

**Entity Name:** VANGUARD CAPITAL, LLC

**FILED**  
**Sep 28, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4630 KIRKMAN RD.  
STE. 610  
ORLANDO, FL 32811

**New Principal Place of Business:**

8815 CONROY WINDERMERE RD.  
STE. 417  
ORLANDO, FL 32835

**Current Mailing Address:**

4630 KIRKMAN RD.  
STE. 610  
ORLANDO, FL 32811

**New Mailing Address:**

8815 CONROY WINDERMERE RD.  
STE. 417  
ORLANDO, FL 32835

**FEI Number:** 20-0814544

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BYRD, JAMES S  
4630 KIRKMAN RD.  
STE. 610  
ORLANDO, FL., FL 32811 US

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

BYRD, JAMES S  
8815 CONROY WINDERMERE RD.  
STE. 417  
ORLANDO, FL., FL 32835 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: JAMES BYRD

09/28/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: JAMES BYRD  
Address: 8815 CONROY WINDERMERE RD., STE. 417  
City-St-Zip: ORLANDO, FL 32835

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: JAMES BYRD

MGRM

09/28/2010

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