

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000019537

**Entity Name:** WELLS UNLIMITED, L.L.C.

**FILED**  
**Oct 03, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

2121 W JEFFERSON ST  
QUINCY, FL 32351 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 417  
QUINCY, FL 32353 US

**New Mailing Address:**

**FEI Number:** 20-0859230

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WELLS, JOHN R  
2121 W JEFFERSON ST  
QUINCY, FL 32351 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: JOHN R WELLS

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: WELLS, JOHN R  
Address: PO BOX 417  
City-St-Zip: QUINCY, FL 32353 US

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: JOHN R WELLS

MGR

10/03/2014

Electronic Signature of Authorized Person

Date