

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000051828

Entity Name: MJS UTILITIES, LLC

**FILED**  
**Oct 20, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

139 SW PECKHAM STREET  
OFFICE  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

139 SW PECKHAM ST.  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

139 SW PECKHAM STREET  
OFFICE  
PORT CHARLOTTE, FL 33952

FEI Number: 20-1611766

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AMES, ANDREW T CPA CFP  
139 SW PECKHAM ST.  
PORT CHARLOTTE, FL 33952 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: ANDREW T. AMES

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: STRAND, MICHAEL J SR  
Address: 139 PECKHAM STREET SW  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL STRAND

OWNE

10/20/2009

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