

# L04000059878

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

07 JUL 12 PM 4:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L04000059878

1. Limited Liability Company's Name

A & J CABLE, LLC

BK

2. Principal Office Address

1969 SOUTH ALAFAYA TR.

Suite, Apt. #, etc.

#125

City & State

ORLANDO FL.

Zip

32828

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. State/Country of Formation

FL/USA

5. Date Organized or Qualified  
To Do Business in Florida

8/9/04

6. FEI Number

Applied For

☒ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required  
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

AUGUSTUS JONES III

400106615574

Street Address (P.O. Box Number is Not Acceptable)

1969 SOUTH ALAFAYA TRAIL

Suite, Apt. #, Etc.

#125

City

ORLANDO

State

FL

Zip Code

32828

BK

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of  
Registered Agent

*Augustus Jones III*

REGISTERED AGENT MUST SIGN

Date 7/11/7

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Member/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
P	AUGUSTUS JONES III	1969 SOUTH ALAFAYA TRAIL #125	ORLANDO / FL / 32828

REINSTATEMENT 2005-2007

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of  
Managing Member/Manager

*Augustus Jones III*

Date 7/11/7

Daytime Phone# 407-574-9486

Typed or printed name of signing Managing Member/Manager AUGUSTUS JONES III

CR20041 (8/01)

L04000059878

Augustus Jones III  
1969 South Alafaya Trail  
#125  
Orlando, FL. 32828

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07 JUL 12 PM 4:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Date: July 12th 2007

BK

Attn: Department of State Division of Corporations

Please be advised that A & J Cable LLC. has not received any mailings or correspondents from the state. Since 2004, the address that the state currently registered is incorrect. The correct address is:  
1969 South Alafaya Trail #125 Orlando, FL. 32828.

As a result of this, we have not received any mailings regarding annual fees/dues and would greatly appreciate the state waiving any penalties that may have been assessed as a result of this. Thank you for your cooperation on this matter.

Sincerely,



Augustus Jones III

BK