

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000071401

Entity Name: LIPJAC, LLC

FILED  
Nov 23, 2005  
Secretary of State

**Current Principal Place of Business:**

201 W. CANTON AVE., SUITE 275  
WINTER PARK, FL 32790

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 478  
WINTER PARK, FL 32790

**New Mailing Address:**

FEI Number: 47-0945712      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

CORPORATION COMPANY OF ORLANDO  
300 SOUTH ORANGE AVE., SUITE 1000 (MJG)  
ORLANDO, FL 328015403 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: J. GREGORY HUMPHRIES, VICE PRESIDENT

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: LIBERTY LIPJAC, LLC,  
Address: 310 W. CENTRAL PARKWAY, SUITE 7000  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM ( ) Change (X) Addition  
Name: BASSLER, ANDREW  
Address: 2308 LAKE SUE DRIVE  
City-St-Zip: WINTER PARK, FL 32803

Title: MGRM ( ) Change (X) Addition  
Name: D'ALOISE, JOHN J  
Address: 2020 CITRUS COVE DRIVE  
City-St-Zip: OVIEDO, FL 32765

Title: MGRM ( ) Change (X) Addition  
Name: VICKERS, CHARLES  
Address: 201 WEST CANTON AVENUE, SUITE 275  
City-St-Zip: WINTER PARK, FL 32790

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES VICKERS

MGRM

11/23/2005

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