

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000073874

Entity Name: KRICO, L.L.C.

**FILED**  
**Jun 27, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

4270 - 126 DR. NORTH  
WEST PALM BEACH, FL 33411

## **New Principal Place of Business:**

16193 KEY LIME BLVD  
LOXAHATCHEE, FL 33470

## **Current Mailing Address:**

4270 - 126 DR. NORTH  
WEST PALM BEACH, FL 33411

## **New Mailing Address:**

16193 KEY LIME BLVD  
LOXAHATCHEE, FL 33470

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

KEMPER, MICHAEL  
4270 - 126 DR. NORTH  
WEST PALM BEACH, FL 33411 US

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

KEMPER, MICHAEL  
16193 KEY LIME BLVD  
LOXAHATCHEE, FL 33470 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: MICHAEL S KEMPER

06/27/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: KEMPER, MICHAEL S  
Address: 16193 KEY LIME BLVD  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MGR  
Name: KEMPER, KIMBERLY D  
Address: 16193 KEY LIME BLVD  
City-St-Zip: LOXAHATCHEE, FL 33470

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: MICHAEL S KEMPER

MGR

06/27/2011

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