

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000018983

Entity Name: AMANDA MORROW LLC

FILED
Apr 11, 2007
Secretary of State

Current Principal Place of Business:

1405 HARRINGTON PARK DRIVE
JACKSONVILLE, FL 32225

New Principal Place of Business:

15 LOGGERHEAD
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

1405 HARRINGTON PARK DRIVE
JACKSONVILLE, FL 32225

New Mailing Address:

15 LOGGERHEAD
PONTE VEDRA BEACH, FL 32082

FEI Number: 20-2326041 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

MORROW, AMANDA
1405 HARRINGTON PARK DRIVE
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

MORROW, AMANDA
15 LOGGERHEAD
PONTE VEDRA BEACH, FL 32225 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: AMANDA MORROW

04/11/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: MS () Change (X) Addition
Name: MORROW, AMANDA
Address: 15 LOGGERHEAD LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the 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: AMANDA MORROW

MM

04/11/2007

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