

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000028703

Entity Name: CHELSEA & CO., LLC

FILED  
Oct 15, 2008  
Secretary of State

**Current Principal Place of Business:**

1236 S GRAND HWY  
CLERMONT, FL 34711

**New Principal Place of Business:**

14518 PINE CONE TRL  
CLERMONT, FL 34711

**Current Mailing Address:**

P.O. BOX 690178  
ORLANDO, FL 32869

**New Mailing Address:**

FEI Number: 83-0423690      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:**

NEVIUS, JEFFREY H  
14518 PINE CONE TRAIL  
CLERMONT, FL 34711      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: JEFFREY NEVIUS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: NEVIUS, JEFFREY H  
Address: 14518 PINE CONE TRAIL  
City-St-Zip: CLERMONT, FL 34711

Title: MGR      ( ) Delete  
Name: NEVIUS, CHELSEA M  
Address: 14518 PINE CONE TRAIL  
City-St-Zip: CLERMONT, FL 34711

**ADDITIONS/CHANGES:**

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

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: JEFFREY H NEVIUS

MGR

10/15/2008

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