

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000029877

**FILED**  
**Jun 22, 2009**  
**Secretary of State**

**Entity Name:** ISMAEL MEJIA, LLC

**Current Principal Place of Business:**

1112 SOUTH MAGNOLIA ST  
APT K202  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

4200 THORNBRIAR LN.  
102  
ORLANDO, FL 32822

**Current Mailing Address:**

1112 SOUTH MAGNOLIA ST  
APT K202  
TALLAHASSEE, FL 32301

**New Mailing Address:**

4200 THORNBRIAR LN.  
102  
ORLANDO, FL 32822

**FEI Number:** 09-5688573

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ( )

**Certificate of Status Desired** (X)

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

MEJIA, ISMAEL  
1112 SOUTH MAGNOLIA ST  
APT K202  
TALLAHASSEE, FL 32301 US

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

MEJIA, ISMAEL  
4200 THORNBRIAR LN  
APT 102  
ORLANDO, FL 32301 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: ISMAEL MEJIA

06/22/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MEJIA, ISMAEL  
Address: 1112 SOUTH MAGNOLIA ST APT K202  
City-St-Zip: TALLAHASSEE, FL 32301

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MEJIA, ISMAEL  
Address: 4200 THORNBRIAR LN  
City-St-Zip: ORLANDO, FL 32822

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: ISMAEL MEJIA

LLC

06/22/2009

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