

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000077251

**Entity Name:** LAURA LEIGHTON LLC

**FILED**  
**Oct 02, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

49 KINDRED STREET  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

49 KINDRED STREET  
STUART, FL 34994

**New Mailing Address:**

**FEI Number:** 20-3518971

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEIGHTON, LAURA K  
49 KINDRED STREET  
STUART, FL 34994 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: LAURA K. LEIGHTON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LEIGHTON, LAURA K  
Address: 49 KINDRED STREET  
City-St-Zip: STUART, FL 34994

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: LAURA K. LEIGHTON

MGRM

10/02/2011

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