

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000086255

Entity Name: R.K.T.K., L.L.C.

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2473 CARE DR., SUITE 2  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

2477 TIM GAMBLE PLACE  
STE 200  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

2473 CARE DR., SUITE 2  
TALLAHASSEE, FL 32308

**New Mailing Address:**

2477 TIM GAMBLE PLACE  
STE 200  
TALLAHASSEE, FL 32308

FEI Number: 20-3386904      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:**

MASON, RONALD N JR.  
2473 CARE DR., SUITE 2  
TALLAHASSEE, FL 32308      US

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

MASON, RONALD N JR.  
2477 TIM GAMBLE PLACE  
STE 200  
TALLAHASSEE, FL 32308      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: RON MASON

01/06/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MASON, RONALD N JR.  
Address: 2477 TIM GAMBLE PLACE STE 200  
City-St-Zip: TALLAHASSEE, FL 32308

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: RON MASON

MGRM

01/06/2010

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