

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000093677

**FILED**  
**Feb 09, 2014**  
**Secretary of State**

**Entity Name:** PARA ET AL, LLC

**Current Principal Place of Business:**

2225 BLANDING BLVD.  
JACKSONVILLE, FL 32210 US

**New Principal Place of Business:**

**Current Mailing Address:**

2125 ERNEST STREET  
JACKSONVILLE, FL 32204 US

**New Mailing Address:**

**FEI Number:** 20-4252381

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARA, KATHERINE B  
2125 ERNEST STREET  
JACKSONVILLE, FL 32204 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:** KATHERINE B PARA

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

**Title:** MGRM  
**Name:** PARA, KATHERINE B  
**Address:** 2125 ERNEST STREET  
**City-St-Zip:** JACKSONVILLE, FL 32204 US

**Title:** MGRM  
**Name:** PARA, P G  
**Address:** 2125 ERNEST STREET  
**City-St-Zip:** JACKSONVILLE, FL 32204

**Title:** MGRM  
**Name:** SHELDON, JANET K  
**Address:** 4633 EAST HIGHWAY 37  
**City-St-Zip:** MOULTRIE, GA 31788

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

**SIGNATURE:** KATHERINE B. PARA

MGRM

02/09/2014

Electronic Signature of Authorized Person

Date