

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000097550

**Entity Name:** BLISS HAMMOCK, LLC

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2335 N.W. 10TH STREET, SUITE 102  
OCALA, FL 34475 US

**New Principal Place of Business:**

**Current Mailing Address:**

2335 N.W. 10TH STREET, SUITE 102  
OCALA, FL 34475 US

**New Mailing Address:**

**FEI Number:** 20-3579523

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

REGISTER, SANDRA L  
2335 N.W. 10TH STREET, SUITE 102  
OCALA, FL 34475 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:** SANDRA L. REGISTER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** REGISTER, SANDRA L  
**Address:** 2335 N. W. 10TH STREET, SUITE 102  
**City-St-Zip:** Ocala, FL 34475 US

**Title:** MGRM  
**Name:** REGISTER, DAVID L  
**Address:** 2335 N. W. 10TH STREET, SUITE 102  
**City-St-Zip:** Ocala, FL 34475 US

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:** SANDRA L. REGISTER

MGRM

04/26/2011

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