

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000106909

Entity Name: DESTINY DESIRE, LLC

**FILED**  
**Jan 05, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

1641 CLYDESDALE AVE  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

1641 CLYDESDALE AVE  
WELLINGTON, FL 33414

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

CRAIG GALLE  
SOUTH SHORE BLVD  
WELLINGTON, FL 33414 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: CRAIG GALLE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: JACOBS, MARY SUE  
Address: 1641 CLYDESDALE AVE  
City-St-Zip: WELLINGTON, FL 33414

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: MARYSUE JACOBS

MANA

01/05/2013

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