

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000004437

**FILED**  
**Oct 28, 2008**  
**Secretary of State**

**Entity Name:** 1ST DOCUMENT SERVICES, LLC

**Current Principal Place of Business:**

1423 SE 10TH STREET  
2  
CAPE CORAL, FL 33990 US

**New Principal Place of Business:**

1423 SE 10TH STREET  
1-B  
CAPE CORAL, FL 33990 US

**Current Mailing Address:**

1423 SE 10TH STREET  
2  
CAPE CORAL, FL 33990 US

**New Mailing Address:**

1423 SE 10TH STREET  
1-B  
CAPE CORAL, FL 33990 US

**FEI Number:** 20-4324727 **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:**

HABIG, ANGELIQUE J  
1139 SE 19TH LANE  
CAPE CORAL, FL 33990 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: ANGELIQUE J HABIG

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HABIG, ANGELIQUE J  
Address: 1139 SE 19TH LANE  
City-St-Zip: CAPE CORAL, FL 33990 US

Title: MGRM ( ) Delete  
Name: DEHAVEN, MELISSA  
Address: 1401 SE 22ND PLACE  
City-St-Zip: CAPE CORAL, FL 33991 US

Title: MEMB ( ) Delete  
Name: LITCHFIELD, VAL  
Address: 1423 SE 18TH STREET  
City-St-Zip: CAPE CORAL, FL 33990 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MEMB (X) Change ( ) Addition  
Name: HARPER, VAL  
Address: 1423 SE 18TH STREET  
City-St-Zip: CAPE CORAL, FL 33990 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ANGELIQUE J HABIG

MGRM

10/28/2008

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