

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000042362

Entity Name: JB SQUARED, LLC

**FILED**  
**Aug 18, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1804 S. ATLANTIC AVE.  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

843 E 14TH AVENUE  
NEW SMYRNA BEACH, FL 32169

**Current Mailing Address:**

1804 S. ATLANTIC AVE.  
NEW SMYRNA BEACH, FL 32169

**New Mailing Address:**

843 E 14TH AVENUE  
NEW SMYRNA BEACH, FL 32169

FEI Number: 20-4775874

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BOYCE, JESSE  
1804 S. ATLANTIC AVE  
NEW SMYRNA BEACH, FL 32169 US

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

BOYCE, JESSE  
843 E 14TH AVENUE  
NEW SMYRNA BEACH, FL 32169 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: JESSE BOYCE

08/18/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BOYCE, JESSE  
Address: 843 E 14TH AVENUE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: JESSE BOYCE

PRES

08/18/2010

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