

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000042589

FILED
Dec 09, 2008
Secretary of State

Entity Name: JAMES E. MCDONALD CHICAGO COMPANY, LLC

Current Principal Place of Business:

63 CARRERA STREET
ST. AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

63 CARRERA STREET
ST. AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number: 20-1476975 **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:

BLACKBURN & COMPANY, LC
5150 BELFORT RD. SOUTH
BUILDING 500
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

GALLAGHER, JAMES C MR
63 CARRERA STREET
ST. AUGUSTINE, FL 32084 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: JAMES C GALLAGHER

12/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GALLAGHER, MICHAEL F
Address: 63 CARRERA STREET
City-St-Zip: ST. AUGUSTINE, FL 32084 US

Title: MGR () Delete
Name: GALLAGHER, JAMES C
Address: 840 LEWISBERG ROAD NW
City-St-Zip: CORVELLIS, OR 97330 US

ADDITIONS/CHANGES:

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

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

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: JAMES C GALLAGHER

MR

12/09/2008

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