

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000044819

**FILED**  
**Oct 12, 2009**  
**Secretary of State**

**Entity Name:** JONATHAN PARKS ARCHITECT, P.L.

**Current Principal Place of Business:**

1471 5TH STREET  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 25333  
SARASOTA, FL 34277

**New Mailing Address:**

**FEI Number:** 02-4788938

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SILBERSTEIN, DAVID M  
50 CENTRAL AVE., STE. 700  
SARASOTA, FL 34236 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:** JONATHAN PARKS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR ( ) Delete  
**Name:** PARKS, JONATHAN  
**Address:** P.O. BOX 25333  
**City-St-Zip:** SARASOTA, FL 34277

**ADDITIONS/CHANGES:**

**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:** JONATHAN PARKS

MGR

10/12/2009

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