

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000060594

Entity Name: FRIENDS & FAMILY, LLC

FILED  
Nov 17, 2008  
Secretary of State

## Current Principal Place of Business:

2500 PARKRIDGE DR.  
NAVARRE, FL 32566

## New Principal Place of Business:

1567 HWY 20 W  
FREEPORT, FL 32439

## Current Mailing Address:

2500 PARKRIDGE DR.  
NAVARRE, FL 32566

## New Mailing Address:

1567 HWY 20 W  
FREEPORT, FL 32439

FEI Number: 56-2593631      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:

COLONEL (MCWATERS), NICOLE  
2500 PARKRIDGE DR.  
NAVARRE, FL 32566      US

## Name and Address of New Registered Agent:

EVANS, DEBI  
1567 HWY 20 W  
FREEPORT, FL 32439      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: DEBI EVANS

11/17/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: EVANS, GILBERT  
Address: 157 MAGNOLIA AVE.  
City-St-Zip: FREEPORT, FL 32439

Title: MGRM ( ) Delete  
Name: EVANS, DEBI  
Address: 157 MAGNOLIA AVE.  
City-St-Zip: FREEPORT, FL 32439

Title: MGRM ( ) Delete  
Name: CAIN, BR  
Address: 21926 LAKEVIEW DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM ( ) Delete  
Name: CAIN, ALICE  
Address: 21926 LAKEVIEW DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM ( ) Delete  
Name: MCWATERS, LARRY  
Address: 2500 PARKRIDGE DR.  
City-St-Zip: NAVARRE, FL 32566

Title: MGRM ( ) Delete  
Name: COLONEL (MCWATERS), NICOLE  
Address: 2500 PARKRIDGE DR.  
City-St-Zip: NAVARRE, FL 32566

## ADDITIONS/CHANGES:

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

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

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

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

Title: MGRM (X) Change ( ) Addition  
Name: BROWN, LINDA  
Address: 16706 JUNIPERO AVE  
City-St-Zip: PANAMA CITY BCH, FL 32413

Title: MGRM (X) Change ( ) Addition  
Name: TOMPKINS, WILLIAM  
Address: 9419 GREENPOINTE DR.  
City-St-Zip: TAMPA, FL 33626

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: DEBI EVANS

MGRM

11/17/2008

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