

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000069006

**Entity Name:** ESTEVEZ HOLDINGS LLC.

**FILED**  
**Feb 04, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5353 23RD AVE SW  
NAPLES, FL 34116

**New Principal Place of Business:**

**Current Mailing Address:**

5353 23RD AVE SW  
NAPLES, FL 34116

**New Mailing Address:**

PO BOX 10643  
NAPLES, FL 34101

**FEI Number:** 02-0781419      **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:**

ESTEVEZ, OMAR  
5353 23RD AVE SW  
NAPLES, FL 34116      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:** OMAR ESTEVEZ

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** ESTEVEZ, OMAR  
**Address:** 5353 23RD AVE SW  
**City-St-Zip:** NAPLES, FL 34116

**Title:** MGRM  
**Name:** ESTEVEZ, LIBERSI  
**Address:** 5353 23RD AVE SW  
**City-St-Zip:** NAPLES, FL 34116

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:** OMAR ESTEVEZ

MGR

02/04/2010

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