

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000081716

**FILED**  
**Oct 04, 2012**  
**Secretary of State**

**Entity Name:** SHANKLIN ESTATES ENTERPRISES, LLC

**Current Principal Place of Business:**

3992 CO. HWY 280 EAST  
DEFUNIAK SPRINGS, FL 32435

**New Principal Place of Business:**

**Current Mailing Address:**

3992 CO. HWY 280 EAST  
DEFUNIAK SPRINGS, FL 32435

**New Mailing Address:**

950 BAY DRIVE  
NICEVILLE, FL 32578

**FEI Number:** 77-0664510

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHANKLIN, JOHN  
3992 CO. HWY 280 EAST  
DEFUNIAK SPRINGS, FL 32435 US

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

SHANKLIN, JOHN  
950 BAY DRIVE  
NICEVILLE, FL 32578 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: JOHN SHANKLIN

10/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SHANKLIN, JOHN  
Address: 950 BAY DRIVE  
City-St-Zip: NICEVILLE, FL 32578

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: JOHN SHANKLIN

MGMR

10/04/2012

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