

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000091496

**FILED**  
**Nov 04, 2011**  
**Secretary of State**

**Entity Name:** TRAVIS D THOMPSON LLC

**Current Principal Place of Business:**

8264 HERLONG RD  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

8264 HERLONG RD  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:** 14-1904525

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMPSON, TRAVIS D  
8264 HERLONG RD  
JACKSONVILLE, FL 32210 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:** TRAVIS D THOMPSON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** THOMPSON, TRAVIS D  
**Address:** 8264 HERLONG RD  
**City-St-Zip:** JACKSONVILLE, FL 32210

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:** TRAVIS D THOMPSON

MGRM

11/04/2011

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