

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000096944

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

**Entity Name:** CHERISHED MEMORIES PET CREMATION SERVICES, LLC

**Current Principal Place of Business:**

224 NW 13TH AVE  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

19707 NW 78TH AVE  
ALACHUA, FL 32615

**Current Mailing Address:**

224 NW 13TH AVE  
GAINESVILLE, FL 32601

**New Mailing Address:**

7513 SW 35TH WAY  
GAINESVILLE, FL 32608

**FEI Number:** 20-5655465

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WILLIAMS, CHARLES L  
224 NW 13TH AVE  
GAINESVILLE, FL 32601 US

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

WILLIAMS, MICHAEL  
19707 NW 78TH AVE  
ALACHUA, FL 32615 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: MICHAEL WILLIAMS

10/04/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SPEAR, ALLAN  
Address: 7513 SW 35TH WAY  
City-St-Zip: GAINESVILLE, FL 32608

Title: MGR  
Name: WILLIAMS, MICHAEL  
Address: 19707 NW 78TH AVE  
City-St-Zip: ALACHUA, FL 32615

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: ALLAN SPEAR

MGRM

10/04/2011

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