

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000005934

Entity Name: MICHAEL C. JONES LLC

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

**Current Principal Place of Business:**

282 LEAWOOD CR.  
NAPLES, FL 34104

**New Principal Place of Business:**

5501 WENDY LN.  
NAPLES, FL 34112

**Current Mailing Address:**

PO BOX 7975  
NAPLES, FL 34101

**New Mailing Address:**

FEI Number: 80-0207802

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JONES, MAX C JR  
139 BRISTOL LN  
NAPLES, FL 34112 US

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

JONES, MICHAEL C  
5501 WENDY LN.  
NAPLES, FL 34112 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 C JONES

12/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: JONES, MICHAEL C  
Address: PO BOX 7975  
City-St-Zip: NAPLES, FL 34101

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: MICHAEL C JONES

MGRM

12/04/2012

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