

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000008933

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** FLORIDA COMMERCIAL & INDUSTRIAL REAL ESTATE SPECIALISTS LLC

**Current Principal Place of Business:**

318 INDIAN TRACE #425  
WESTON, FL 33326 US

**New Principal Place of Business:**

7557 W SAND LAKE RD  
109  
ORLANDO, FL 32819 US

**Current Mailing Address:**

318 INDIAN TRACE #425  
WESTON, FL 33326 US

**New Mailing Address:**

7557 W SAND LAKE RD  
109  
ORLANDO, FL 32819 US

**FEI Number:** **FEI Number Applied For (X)** **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:**

GRESS, JON A  
318 INDIAN TRACE #425  
WESTON, FL 33326 US

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

GRESS, JON A  
7557 W SAND LAKE RD  
ORLANDO, FL 32819 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: JON GRESS

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GRESS, JON A  
Address: 318 INDIAN TRACE #425  
City-St-Zip: WESTON, FL 33326 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GRESS, JON A  
Address: 7557 W SAND LAKE RD  
City-St-Zip: ORLANDO, FL 32819 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JON A GRESS

MGR

04/30/2009

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