

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000009121

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Entity Name:** KNIGHT-TURNER ENTERPRISES, LLC

**Current Principal Place of Business:**

8090 TIPPIN AVENUE  
PENSACOLA, FL 32514 US

**New Principal Place of Business:**

**Current Mailing Address:**

8090 TIPPIN AVENUE  
PENSACOLA, FL 32514 US

**New Mailing Address:**

**FEI Number:** 20-8300264      **FEI Number Applied For ( )**      **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:**

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

KNIGHT, JOSEPH  
8090 TIPPIN AVENUE  
PENSACOLA, FL 32514 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:** JOSEPH KNIGHT

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** KNIGHT, JOSEPH  
**Address:** 8090 TIPPIN AVENUE  
**City-St-Zip:** PENSACOLA, FL 32514 US

**Title:** MGRM  
**Name:** KNIGHT, NELLIE  
**Address:** 8090 TIPPIN AVENUE  
**City-St-Zip:** PENSACOLA, FL 32514 US

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:** JOSEPH KNIGHT

MGRM

04/12/2010

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