

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000012995

FILED
Oct 28, 2008
Secretary of State

Entity Name: ROB THE PHONE DOCTOR L.L.C.

Current Principal Place of Business:

3916 CLEVELAND AVE
FT. MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

2708 NW 7TH ST
CAPE CORAL, FL 33993

New Mailing Address:

3916 CLEVELAND AVE
FT. MYERS, FL 33901

FEI Number: 20-8434985 **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:

MASON, JENNIFER R
2708 NW 7TH ST
CAPE CORAL, FL 33993 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: JENNIFER MASON

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MASON, ROBERT
Address: 13905 ABBEY LANE E.
City-St-Zip: LARGO, FL 33771

Title: MGRM () Delete
Name: MASON, JENNIFER
Address: 2708 NW 7TH ST
City-St-Zip: CAPE CORAL, FL 33993

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT MASON

MGR

10/28/2008

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