

**2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000017306

**FILED  
Oct 06, 2013  
Secretary of State**

**Entity Name:** POE & ASSOCIATES REALTY, LLC.

**Current Principal Place of Business:**

6270 ROCK CREEK CIRCLE  
ELLENTON, FL 34222

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1273  
ELLENTON, FL 34222

**New Mailing Address:**

FEI Number: 20-8476339      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

POE, PETER J  
6270 ROCK CREEK CIRCLE  
ELLENTON, FL 34222    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: PETER J. POE

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: POE, PETER J  
Address: 6270 ROCK CREEK CIRCLE  
City-St-Zip: ELLENTON, FL 34222

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: PETER J. POE

MR.

10/06/2013

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