2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000050178

21463 KENYON AVENUE

City-St-Zip: PORT CHARLOTTE, FL 33952 US

Address:

Entity Name: KJ ASSOCIATES OF SW FLORIDA LLC

FILED Oct 15, 2009 Secretary of State

Current Principal Place of Business:		New Principal F	Place of Business:	
	EDO BLADE BOULEVARD #2B ARLOTTE, FL 33948 US			
Current Mailing Address:		New Mailing Ad	New Mailing Address:	
	EDO BLADE BOULEVARD #2B ARLOTTE, FL 33948 US			
FEI Number: 26-0148382 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:				
	, .a.a			
	E, KRISTIN IYON AVENUE ARLOTTE, FL 33952 US			
	named entity submits this statem of Florida.	nent for the purpose of changing its reg	istered office or registered agent, or both	
SIGNATUF	RE: KRISTIN MANNONE			
	Electronic Signature of Re	gistered Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANG	ES:	
Title: Name: Address: City-St-Zip:	MGR () Delete MANNONE, KRISTIN 21463 KENYON AVENUE PORT CHARLOTTE, FL 33952 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	MGRM () Delete	Title:	() Change () Addition	

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: KRISTIN MANNONE MGR 10/15/2009