

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000053583

**FILED**  
**Jul 13, 2010**  
**Secretary of State**

**Entity Name:** BOOTH CORBETT & ASSOCIATES LLC

**Current Principal Place of Business:**

45 WEST 4TH STREET  
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

319 WEST 10TH STREET  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

45 WEST 4TH STREET  
JACKSONVILLE, FL 32206

**New Mailing Address:**

319 WEST 10TH STREET  
JACKSONVILLE, FL 32206

**FEI Number:** 26-0799811

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NOONAN, SUSAN B V.P.  
45 WEST 4TH STREET  
JACKSONVILLE, FL 32206 US

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

NOONAN, SUSAN B V.P.  
319 WEST 10TH STREET  
JACKSONVILLE, FL 32206 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: SUSAN B. NOONAN

07/13/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: NOONAN, SUSAN B V.P.  
Address: 319 WEST 10TH STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: MGRM  
Name: NOONAN, FRANCIS M PRES.  
Address: 319 WEST 10TH STREET  
City-St-Zip: JACKSONVILLE, FL 32206

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: FRANCIS M. NOONAN

PRES

07/13/2010

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