

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000055886

FILED
Oct 14, 2008
Secretary of State

Entity Name: JARVIS MOSS ENTERPRISES LLC

Current Principal Place of Business:

16111 6TH STREET EAST
REDINGTON BEACH, FL 33708

New Principal Place of Business:

16111 6TH STREET EAST
REDINGTON BEACH, FL 33708 US

Current Mailing Address:

16111 6TH STREET EAST
REDINGTON BEACH, FL 33708

New Mailing Address:

15215 S 48TH STREET
SUITE 139
PHOENIX, AZ 85044 US

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

A1A REGISTERED AGENT INC
5647 110TH AVE. NORTH
ROYAL PALM BEACH, FL 334110000 US

Name and Address of New Registered Agent:

A1A REGISTERED AGENT INC.
5647 110TH AVE. NORTH
ROYAL PALM BEACH, FL 33411 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: TINA MAKI

10/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MOSS, JARVIS
Address: 16111 6TH STREET EAST
City-St-Zip: REDINGTON BEACH, FL 33708

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MOSS, JARVIS
Address: 16111 6TH STREET EAST
City-St-Zip: REDINGTON BEACH, FL 33708 US

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: JARVIS MOSS

MGRM

10/14/2008

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