

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000058395

Entity Name: JO ELLEN NASH, LLC

FILED
Oct 09, 2013
Secretary of State

Current Principal Place of Business:

2132 MISSION DRIVE
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

2132 MISSION DRIVE
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 26-0283924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NASH, JO ELLEN H
2132 MISSION DRIVE
NAPLES, FL 34019 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: JO ELLEN NASH

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MEMB
Name: NASH, JO ELLEN MEMBER
Address: 2132 MISSION DRIVE
City-St-Zip: NAPLES, FL 34109 US

Title: MS
Name: NASH, JO ELLEN
Address: 3000 TAMiami TRAIL N
City-St-Zip: NAPLES, FL 34103 US

Title: MS
Name: NASH, JO ELLEN
Address: 589 FIFTH AVE SOUTH
City-St-Zip: NAPLES, FL 34102 US

Title: MS
Name: NASH, JO ELLEN
Address: 589 FIFTH AVE SOUTH
City-St-Zip: NAPLES, FL 34102 US

Title: MS
Name: NASH, JO ELLEN
Address: 589 FIFTH AVE SOUTH
City-St-Zip: NAPLES, FL 34102 US

Title: MS
Name: NASH, JO ELLEN
Address: 589 FIFTH AVE SOUTH
City-St-Zip: NAPLES, FL 34102 US

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: JO ELLEN NASH

MEMB

10/09/2013

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