

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000074348

Entity Name: JAF RESTORATION LLC

FILED  
Oct 08, 2008  
Secretary of State

## Current Principal Place of Business:

364 NORTHPOINTE CT.  
202  
ALTAMONTE SPRINGS, FL 32701

## Current Mailing Address:

364 NORTHPOINTE CT.  
202  
ALTAMONTE SPRINGS, FL 32701

## New Principal Place of Business:

364 NORTHPOINTE COURT  
202  
ALTAMONTE SPRINGS, FL 32701 US

## New Mailing Address:

364 NORTHPOINTE COURT  
202  
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: FEI Number Applied For (X) 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:

BRACCO, OMAR A  
364 NORTHPOINTE CT.  
202  
ALTAMONTE SPRINGS, FL 32701 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: OMAR A. BRACCO

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: CAZUNI, ANGELA M  
Address: 364 NORTHPOINTE CT. APT. 202  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGRM ( ) Delete  
Name: BRACCO, OMAR A  
Address: 364 NORTHPOINTE CT. APT. 202  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: CAZUNI, ANGELA M  
Address: 364 NORTHPOINTE CT. APT. 202  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: MGRM (X) Change ( ) Addition  
Name: BRACCO, OMAR A  
Address: 364 NORTHPOINTE CT. APT. 202  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 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: OMAR A. BRACCO

MGRM

10/08/2008

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