

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L07000083219

1. Entity Name
GOD'S CREATIONS, LLC



FILED

2009 JUN -8 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1650 MARGARET ST. #302
JACKSONVILLE, FL 32204-3869

Mailing Address
5625 CENTRAL AVE.
ST. PETERSBURG, FL 33710



2. Principal Place of Business - No P.O. Box #

c/o Blane Land

Suite, Apt. #, etc.

3990 Julington Creek Rd.

City & State

Jacksonville, FL

Zip
32223

Country
USA

3. Mailing Address

c/o Blane Land

Suite, Apt. #, etc.

3990 Julington Creek Rd.

City & State

Jacksonville, FL

Zip
32223

Country
USA

04302009 REIN-LLC

CR2E101 (1/07)

4. FEI Number

59-3436993

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHECHELE, DANIEL J
5625 CENTAL AVE.
ST. PETERSBURG, FL 33710

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$277.50

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete
NAME IZUMOTO, HIDEO
STREET ADDRESS 1650 MARGARET ST. #302
CITY-ST-ZIP JACKSONVILLE, FL 322043869

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGR ☐ Change ☐ Addition
NAME Hideo Izumoto
STREET ADDRESS c/o Blane Land
CITY-ST-ZIP 3990 Julington Creek Rd.

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS Jacksonville, FL 32223
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME 800155461978
STREET ADDRESS 05/05/09--01039--009 **138.75
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME 800155461978
STREET ADDRESS 06/08/09--01003--005 **138.75
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Hideo Izumoto

Apr 30, 2009

(127)

813-6007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #