

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000084454

FILED  
Oct 31, 2008  
Secretary of State

Entity Name: KIRKLAND & ASSOCIATES OF FLORIDA, LLC

**Current Principal Place of Business:**

1101 OLD MILL DR  
DELTONA, FL 32725

**New Principal Place of Business:**

**Current Mailing Address:**

1101 OLD MILL DR  
DELTONA, FL 32725

**New Mailing Address:**

FEI Number: 26-1397869      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

WILLIS, ARLENE  
1101 OLD MILL DR  
DELTONA, FL 32725    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: LAFAWN KIRKLAND

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: WILLIS, ARLENE  
Address: 1101 OLD MILL DR  
City-St-Zip: DELTONA, FL 32725

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM      ( ) Delete  
Name: KIRKLAND, LAFAWN  
Address: 1273 BEARSDEN CIR  
City-St-Zip: AVON, IN 46123

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LAFAWN KIRKLAND

MGRM

10/31/2008

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