

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000085045

Entity Name: DSAE, LLC

**FILED**  
**Nov 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

370 15TH AVENUE SOUTH  
UNIT A&B  
JACKSONVILLE BEACH, FL 32250 US

**New Principal Place of Business:**

**Current Mailing Address:**

370 15TH AVENUE SOUTH  
UNIT A&B  
JACKSONVILLE BEACH, FL 32250 US

**New Mailing Address:**

FEI Number: 06-1684900

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST.  
500  
ORLANDO, FL 32804 US

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

DOHERTY, CAREN M  
370 15TH AVE. S.  
UNIT A & B  
JACKSONVILLE, FL 32250 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: CAREN M. DOHERTY

11/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DOHERTY, CAREN  
Address: 370 15TH AVENUE SOUTH UNIT A&B  
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: MGRM  
Name: SOMMERS, CRAIG  
Address: 370 15TH AVENUE SOUTH UNIT A&B  
City-St-Zip: JACKSONVILLE BEACH, FL 32250 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: CRAIG A. SOMMERS

MGRM

11/16/2010

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