

**2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000088664

**FILED  
Jul 30, 2013  
Secretary of State**

**Entity Name:** GAVIN C. JONES LLC

**Current Principal Place of Business:**

2345 SCENIC HIGHWAY  
PENSACOLA, FL 32503

**New Principal Place of Business:**

**Current Mailing Address:**

2345 SCENIC HIGHWAY  
PENSACOLA, FL 32503

**New Mailing Address:**

FEI Number: 61-1718543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JONES, GAVIN C  
2345 SCENIC HIGHWAY  
PENSACOLA, FL 32503 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: GAVIN C JONES

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: JONES, GAVIN C  
Address: 2345 SCENIC HIGHWAY  
City-St-Zip: PENSACOLA, FL 32503

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: GAVIN C JONES

MR.

07/30/2013

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