## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L07000096399

Entity Name: JMDS, LLC

FILED Oct 27, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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801 EATON ST. 1910 N. ROOSEVELT BLVD KEY WEST, FL 33040 US KEY WEST, FL 33040 US

Current Mailing Address: New Mailing Address:

801 EATON ST. 1910 N. ROOSEVELT BLVD KEY WEST, FL 33040 US KEY WEST, FL 33040 US

FEI Number: 26-1626306 FEI Number Applied For ( ) 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: Name and Address of New Registered Agent:

KELLEY, ALBERT L 926 TRUMAN AVE.

KEY WEST, FL 33040 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: ALBERT KELLEY

Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MANAGERS:**

ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition Name: BRYANT, HOLLY R Name: BRYANT, HOLLY R

 Address:
 801 EATON ST.
 Address:
 1910 N ROOSEVELT BLVD

 City-St-Zip:
 KEY WEST, FL 33040 US
 City-St-Zip:
 KEY WEST, FL 33040 US

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 MICLETTE, MARC
 Name:
 MICLETTE, MARC

 Address:
 801 EATON ST.
 Address:
 1910 N ROOSEVELT BLVD

 City-St-Zip:
 KEY WEST, FL 33040 US
 City-St-Zip:
 KEY WEST, FL 33040 US

Title: ( ) Delete Title: MGRM ( ) Change (X) Addition

 Name:
 Name:
 BOVE, ANTHONY

 Address:
 Address:
 1910 N ROOSEVELT BLVD

 City-St-Zip:
 City-St-Zip:
 KEY WEST, FL 33040 US

Title: ( ) Delete Title: MGRM ( ) Change (X) Addition

 Name:
 Name:
 REITZ, MARIANNE

 Address:
 Address:
 1910 N ROOSEVELT BLVD

 City-St-Zip:
 City-St-Zip:
 KEY WEST, FL 33040 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: ANTHONY BOVE MGRM 10/27/2008