

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000111455

FILED
Sep 30, 2009
Secretary of State

Entity Name: PATRICIA CLINE, LLC.

Current Principal Place of Business:

216 LINDA VISTA DR.
DEBARY, FL 32713 US

New Principal Place of Business:

Current Mailing Address:

216 LINDA VISTA DR.
DEBARY, FL 32713 US

New Mailing Address:

FEI Number: 41-2168147 **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:

CLINE, PATRICIA
216 LINDA VISTA DR.
DEBARY, FL 32713 US

Name and Address of New Registered Agent:

CLINE, PATRICIA A
216 LINDA VISTA DR.
DEBARY, FL 32713 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: PATRICIA A. CLINE

09/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CLINE, PATRICIA
Address: 216 LINDA VISTA DR.
City-St-Zip: DEBARY, FL 32713 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CLINE, PATRICIA A
Address: 216 LINDA VISTA DR.
City-St-Zip: DEBARY, FL 32713 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: PATRICIA A. CLINE

MS

09/30/2009

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