

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000114705

Entity Name: PS.23 DESIGN STUDIO, LLC

**FILED**  
**Oct 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

WHARFSIDE WAY  
300D  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

12620-3 BEACH BLVD  
SUITE 175  
JACKSONVILLE, FL 32246

**New Mailing Address:**

FEI Number: 26-1417148

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEAGUE, BARBARA JANE ESQ.  
LEAGUE & JESPERSON, P.A.  
3955 RIVERSIDE AVENUE, SUITE 100  
JACKSONVILLE, FL 32205 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: BARBARA LEAGUE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ROMYANOND, ASITHORN  
Address: 300D WHARFSIDE WAY  
City-St-Zip: JACKSONVILLE, FL 32207

Title: PS  
Name: ROMYANOND, ASITHORN  
Address: 300D WHARFSIDE WAY  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP  
Name: MCCULLY, FAUNCE R  
Address: 300D WHARFSIDE WAY  
City-St-Zip: JACKSONVILLE, FL 32207

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: ASITHORN ROMYANOND

MGR

10/10/2012

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