

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000009489

**Entity Name:** EZELL BROWN, LLC

**FILED**  
**Nov 11, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3650 CORAL RIDGE DRIVE, STE. 105  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

3650 CORAL RIDGE DRIVE, STE. 105  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

**FEI Number:** 36-4511781

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BROWN, EZELL  
3650 CORAL RIDGE DRIVE, STE. 105  
CORAL SPRINGS, FL 33065 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:** EZELL BROWN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** BROWN, EZELL  
**Address:** 3650 CORAL RIDGE DRIVE, STE. 105  
**City-St-Zip:** CORAL SPRINGS, FL 33065

**Title:** MGR  
**Name:** BROWN, ROSHUNDA  
**Address:** 3650 CORAL RIDGE DRIVE, STE. 105  
**City-St-Zip:** CORAL SPRINGS, FL 33065

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:** EZELL BROWN

MGR

11/11/2010

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