

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000016510

**FILED**  
**Oct 01, 2012**  
**Secretary of State**

**Entity Name:** LAW OFFICES OF ANGELA BUCCI, PLLC

**Current Principal Place of Business:**

2600 NORTH ANDREWS AVE.  
WILTON MANORS, FL 33311 US

**New Principal Place of Business:**

**Current Mailing Address:**

2600 NORTH ANDREWS AVE.  
WILTON MANORS, FL 33311 US

**New Mailing Address:**

**FEI Number:** 26-2039066

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUCCI, ANGELA R  
2600 NORTH ANDREWS AVE.  
WILTON MANORS, FL 33311 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: ANGELA BUCCI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BUCCI, ANGELA R  
Address: 2600 NORTH ANDREWS AVE.  
City-St-Zip: WILTON MANORS, FL 33311

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: ANGELA BUCCI

MGR

10/01/2012

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