

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000017931

**FILED**  
**Oct 16, 2009**  
**Secretary of State**

**Entity Name:** UNIQUE POWERSPORTS OF JACKSONVILLE, LLC

**Current Principal Place of Business:**

2414 WATTLE TREE ROAD WEST  
JACKSONVILLE, FL 32246 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 19585  
JACKSONVILLE, FL 32245 US

**New Mailing Address:**

2414 WATTLE TREE ROAD WEST  
JACKSONVILLE, FL 32246 US

**FEI Number:** 26-1970759 **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:**

FIRST CLASS LOGISTICS, LLC  
2414 WATTLE TREE ROAD WEST  
JACKSONVILLE, FL 32246 US

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

WEBB, PATRICIA D PRES  
2414 WATTLE TREE ROAD WEST  
JACKSONVILLE, FL 32246 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 D WEBB

10/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: WEBB, PATRICIA D  
Address: PO BOX 19585  
City-St-Zip: JACKSONVILLE, FL 32245 US

Title: MGR ( ) Delete  
Name: WEBB, HAROLD T  
Address: PO BOX 19585  
City-St-Zip: JACKSONVILLE, FL 32245 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 D WEBB

MGNR

10/16/2009

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