

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000019799

**FILED**  
**Dec 14, 2009**  
**Secretary of State**

**Entity Name:** CELLI & SONS, LLC

**Current Principal Place of Business:**

1336 13TH ST  
ORANGE CITY, FL 32763

**New Principal Place of Business:**

1336 13TH ST  
BOX 10-A  
ORANGE CITY, FL 32763

**Current Mailing Address:**

1336 13TH ST  
ORANGE CITY, FL 32763

**New Mailing Address:**

1336 13TH ST  
BOX 10-A  
ORANGE CITY, FL 32763

**FEI Number:**                      **FEI Number Applied For (X)**                      **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:**

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

ALL FLORIDA FIRM INC  
813 DELTONA BLVD  
STE A  
DELTONA, FL 32725 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: DEVIN NEWMAN FOR ALL FLORIDA FIRM INC

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: CELLI, JONATHAN B  
Address: 1336 13TH ST  
City-St-Zip: ORANGE CITY, FL 32763

Title: MGR (X) Change ( ) Addition  
Name: CELLI, JONATHAN B  
Address: 1336 13TH ST BOX 10-A  
City-St-Zip: ORANGE CITY, FL 32763

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: JONATHAN B CELLI

MGR

12/14/2009

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