

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000020042

**FILED**  
**Jan 04, 2010**  
**Secretary of State**

**Entity Name:** DALTON INSURANCE AGENCY, LLC

**Current Principal Place of Business:**

12118 PANAMA CITY BCH. PKWY.  
SUITE C  
PANAMA CITY BCH, FL 32407 US

**New Principal Place of Business:**

17320 PANAMA CITY BCH. PKWY.  
#204  
PANAMA CITY BCH, FL 32413 US

**Current Mailing Address:**

12118 PANAMA CITY BCH. PKWY.  
SUITE C  
PANAMA CITY BCH., FL 32407 US

**New Mailing Address:**

17320 PANAMA CITY BCH. PKWY.  
#204  
PANAMA CITY BCH, FL 32413 US

**FEI Number:** 26-2037733      **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:**

DALTON, AMY K  
12118 PANAMA CITY BCH. PKWY.  
SUITE C  
PANAMA CITY BCH., FL 32407 US

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

DALTON, AMY K  
17320 PANAMA CITY BCH. PKWY.  
#204  
PANAMA CITY BCH., FL 32413 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: AMY DALTON

01/04/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DALTON, AMY K  
Address: 301 GENEVA AVE  
City-St-Zip: PANAMA CITY BEACH, FL 32407 US

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: AMY DALTON

MGRM

01/04/2010

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