

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000022583

**Entity Name:** GREGORY HILLS 801 LLC

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3900 39TH STREET S.W.  
LEHIGH ACRES, FL 33971

**New Principal Place of Business:**

4612 15TH ST., SW  
LEHIGH ACRES, FL 33973

**Current Mailing Address:**

3900 39TH STREET S.W.  
LEHIGH ACRES, FL 33971

**New Mailing Address:**

1114 OCONEE BELL CT  
SENECA, SC 29672

**FEI Number:** 22-3977096      **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:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

MIKKELSEN, GREGORY P MR.  
4612 15TH ST. SW  
LEHIGH ACRES, FL 33973      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: GREGORY P. MIKKELSEN

01/07/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** MIKKELSEN, DAVID  
**Address:** 1114 OCONEE BELL CT.  
**City-St-Zip:** SENECA, SC 29672

**Title:** MEM.  
**Name:** MIKKELSEN, CAROLE  
**Address:** 1114 OCONEE BELL CT  
**City-St-Zip:** SENECA, SC 29672

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: DAVID P. MIKKELSEN

MGR

01/07/2010

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