

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000024047

Entity Name: BRIAN D. SOLOMON, PL

**FILED**  
**Oct 06, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3156 FOREST BREEZE WAY  
SAINT CLOUD, FL 34771

**New Principal Place of Business:**

1311 INDIANA AVENUE  
SAINT CLOUD, FL 34769

**Current Mailing Address:**

3156 FOREST BREEZE WAY  
SAINT CLOUD, FL 34771

**New Mailing Address:**

1311 INDIANA AVENUE  
SAINT CLOUD, FL 34769

FEI Number: 26-2116486

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SOLOMON, BRIAN D  
3156 FOREST BREEZE WAY  
SAINT CLOUD, FL 34771 US

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

SOLOMON, BRIAN D  
1311 INDIANA AVENUE  
SAINT CLOUD, FL 34769 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: BRIAN D. SOLOMON

10/06/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SOLOMON, BRIAN D  
Address: 1311 INDIANA AVENUE  
City-St-Zip: SAINT CLOUD, FL 34769

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: BRIAN D. SOLOMON

MM

10/06/2010

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