

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000041829

Entity Name: SMW VENTURES LLC

**FILED**  
**Jan 29, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

4870 ORTEGA HILLS DR  
JACKSONVILLE, FL 32244

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 722  
MIDDLEBURG, FL 32244

**New Mailing Address:**

P.O. BOX 722  
MIDDLEBURG, FL 32050

FEI Number: 29-3849286

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WHEELER, STEVEN M  
4870 ORTEGA HILLS DR  
JACKSONVILLE, FL 32244 US

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

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: STEVEN M WHEELER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WHEELER, STEVEN M  
Address: 4870 ORTEGA HILLS DR  
City-St-Zip: JACKSONVILLE, FL 32244

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: STEVEN M WHEELER

OWNE

01/29/2013

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