

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000055656

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

**Entity Name:** NORTH FLORIDA RECOVERY LLC

**Current Principal Place of Business:**

1847 CHATHAM VILLAGE DR.  
ORANGE PARK, FL 32003

**New Principal Place of Business:**

**Current Mailing Address:**

1847 CHATHAM VILLAGE DR.  
ORANGE PARK, FL 32003

**New Mailing Address:**

8066 CR 229.  
STARKE, FL 32091

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

SIMPSON, DENNIS G  
1847 CHATHAM VILLAGE DR.  
ORANGE PARK, FL 32003 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: DENNIS GLEN SIMPSON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SIMPSON, DENNIS G  
Address: 1847 CHATHAM VILLAGE DR.  
City-St-Zip: ORANGE PARK, FL 32003

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: DENNIS G SIMPSON

MGR

09/07/2010

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