

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000060413

Entity Name: PRINCETON AVENUE, LLC

**FILED**  
**Apr 02, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1403 MEDICAL PLAZA DRIVE  
SUITE 100  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

1403 MEDICAL PLAZA DRIVE  
SUITE 100  
SANFORD, FL 32771 US

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

STRINGER, SUZANNE  
1403 MEDICAL PLAZA DRIVE  
SUITE 100  
SANFORD, FL 32771 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: SUZANNE STRINGER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: STRINGER, SUZANNE  
Address: 1403 MEDICAL PLAZA DRIVE SUITE 100  
City-St-Zip: SANFORD, FL 32771 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: SUZANNE STRINGER

MBMR

04/02/2010

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