

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000064753

**FILED**  
**Jan 25, 2011**  
**Secretary of State**

**Entity Name:** ELKANA DIXON LAWN SERVICE AND HANDYMAN LLC

**Current Principal Place of Business:**

6980 NW 24 CT  
SUNRISE, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

6980 NW 24 CT  
SUNRISE, FL 33313

**New Mailing Address:**

**FEI Number:** 10-3684188

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIXON, ELKANA  
6980 NW 24 CT  
SUNRISE, FL 33313 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:** ELKANA DIXON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** DIXON, ELKANA  
**Address:** 6980 NW 24 CT  
**City-St-Zip:** SUNRISE, FL 33313

**Title:** MGR  
**Name:** DIXON, ELKANA  
**Address:** 6980 NW 24 CT  
**City-St-Zip:** SUNRISE, FL 33313

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:** ELKANA DIXON

MGR

01/25/2011

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