

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000072226

**FILED**  
**Dec 03, 2013**  
**Secretary of State**

**Entity Name:** FUCA LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

2335 NW 282ND ST  
NEWBERRY, FL 32669

**New Principal Place of Business:**

25715 NEWBERRY RD.  
NEWBERRY, FL 32669

**Current Mailing Address:**

2335 NW 282ND ST  
NEWBERRY, FL 32669

**New Mailing Address:**

25715 NEWBERRY RD.  
NEWBERRY, FL 32669

**FEI Number:** 80-0228506

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEISER, DAVID  
2335 NW 282ND ST  
NEWBERRY, FL 32669 US

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

LEISER, DAVID B  
25715 NEWBERRY RD  
NEWBERRY, FL 32669 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: DAVID B LEISER

12/03/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LEISER, DAVID B  
Address: 25715 NEWBERRY RD  
City-St-Zip: NEWBERRY, FL 32669

Title: MGRM  
Name: SHIPPEE, DIANA M  
Address: 432 TIKI WAY  
City-St-Zip: CHESAPEAKE, VA 23322

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: DAVID B LEISER

MGRM

12/03/2013

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