## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L08000078549

Entity Name: GRASS GATOR LAWNCARE, LLC

**FILED** Dec 25, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

120 SOUTHWALK PL

ST. AUGUSTINE, FL 32086 US

**Current Mailing Address: New Mailing Address:** 

120 SOUTHWALK PL

ST. AUGUSTINE, FL 32086 US

FEI Number: 01-0912627 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

EDMUNDS, YUKARI 120 SOUTHWALK PL

ST. AUGUSTINE, FL 32086 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: EDMUNDS, YUKARI

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: MGRM

MGRM (X) Change ( ) Addition () Delete PENNINGTON II, CHARLES EDMUNDS, DONALD Name: Name:

101 FOSTER LANE Address: 120 SOUTHWALK PL Address: City-St-Zip: PALM COAST, FL 32137 US City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition

Name: PENNINGTON, DEANNA Name: EDMUNDS, YUKARI

Address: 101 FOSTER LANE Address: 120 SOUTHWALK PL City-St-Zip: PALM COAST, FL 32137 US City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: MGRM (X) Delete Title: () Change () Addition EDMUNDS, DONALD Name: Name:

Address: 120 SOUTHWALK PL Address: City-St-Zip: ST. AUGUSTINE, FL 32086 US City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

EDMUNDS, YUKARI Name: Name: Address: 120 SOUTHWALK PL Address: City-St-Zip: ST. AUGUSTINE, FL 32086 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DONALD EDMUNDS 12/25/2009