

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000085537

**FILED**  
**Oct 01, 2013**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA MEDIATORS LLC

**Current Principal Place of Business:**

26336 STATE ROAD 19  
SUITE 2  
HOWY IN THE HILLS, FL 34737

**New Principal Place of Business:**

26336 STATE ROAD 19  
SUITE 2  
HOWEY IN THE HILLS, FL 34737

**Current Mailing Address:**

26336 STATE ROAD 19  
SUITE 2  
HOWY IN THE HILLS, FL 34737

**New Mailing Address:**

26336 STATE ROAD 19  
SUITE 2  
HOWEY IN THE HILLS, FL 34737

**FEI Number:** 26-4522630

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOYCE, RICHARD F  
26336 STATE ROAD 19  
HOWY IN THE HILLS, FL 34737 US

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

JOYCE, RICHARD F  
26336 STATE ROAD 19  
HOWEY IN THE HILLS, FL 34737 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: RICHARD F JOYCE

10/01/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: JOYCE, RICHARD F  
Address: 26336 STATE ROAD 19  
City-St-Zip: HOWY IN THE HILLS, FL 34737

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: RICHARD F. JOYCE

MGRM

10/01/2013

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