

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000094059

**FILED**  
**Jun 01, 2010**  
**Secretary of State**

**Entity Name:** MICHAEL LOPEZ PRODUCTIONS LLC

**Current Principal Place of Business:**

4168 SOUTH ATLANTIC AVENUE  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

366 FLAGLER AVENUE  
SURF COAST REALTY  
NEW SMYRNA BEACH, FL 32169

**Current Mailing Address:**

P.O BOX 2183  
NEW SMYRNA BEACH, FL 32170

**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:**

STOWELL, JULIE  
558 NW CORNELL AVENUE  
PORT ST LUCIE, FL 34983    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: JULIE STOWELL

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LOPEZ, MICHAEL  
Address: 366 FLAGLER AVENUE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: MICHAEL LOPEZ

PRES

06/01/2010

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