

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000097293

**FILED**  
**Feb 22, 2010**  
**Secretary of State**

**Entity Name:** JAX CELL PHONE SALES, LLC

**Current Principal Place of Business:**

3558 LONE TREE LN.  
JACKSONVILLE, FL 32216 US

**New Principal Place of Business:**

12765 CHETS CREEK DR. N.  
JACKSONVILLE, FL 32224 US

**Current Mailing Address:**

3558 LONE TREE LN.  
JACKSONVILLE, FL 32216 US

**New Mailing Address:**

12765 CHETS CREEK DR. N.  
JACKSONVILLE, FL 32224 US

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

TURNER, JAMES E  
3358 LONE TREE LN.  
JACKSONVILLE, FL 32216 US

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

TURNER, JAMES E  
12765 CHETS CREEK DR. N.  
JACKSONVILLE, FL 32224 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: JAMES TURNER

02/22/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: TURNER, JAMES E  
Address: 12765 CHETS CREEK DR. N.  
City-St-Zip: JACKSONVILLE, FL 32224 US

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: JAMES E. TURNER

MGR

02/22/2010

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