

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000100077

Entity Name: FLVA ADVENTURES, LLC

**FILED**  
**Feb 03, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1450 N. US HW 1, STE 500  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

158 AVALON DRIVE  
ORMOND BEACH, FL 32176 US

**Current Mailing Address:**

1450 N. US HW 1, STE 500  
ORMOND BEACH, FL 32174 US

**New Mailing Address:**

158 AVALON DRIVE  
ORMOND BEACH, FL 32176 US

FEI Number: 59-3066570

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

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

WILLIAMS, JOSHUA P  
158 AVALON DRIVE  
ORMOND BEACH, FL 32176 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: JOSHUA WILLIAMS

02/03/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WILLIAMS, JOSHUA P  
Address: 158 AVALON DRIVE  
City-St-Zip: ORMOND BEACH, FL 32176 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: JOSHUA WILLIAMS

MGR

02/03/2012

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