

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000104027

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** SURREY ST., LLC

**Current Principal Place of Business:**

541 EAST TENNESSEE ST.  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

808 W. ST. AUGUSTINE ST.  
TALLAHASSEE, FL 32304

**Current Mailing Address:**

541 EAST TENNESSEE ST.  
TALLAHASSEE, FL 32308

**New Mailing Address:**

808 W. ST. AUGUSTINE ST.  
TALLAHASSEE, FL 32304

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEPARULO, ROBERT P  
541 EAST TENNESSEE ST.  
TALLAHASSEE, FL 32308 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: ROBERT LEPARULO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LEPARULO, ROBERT P  
Address: 808 W. ST. AUGUSTINE ST.  
City-St-Zip: TALLAHASSEE, FL 32304

Title: MGRM  
Name: LEPARULO, WILLIAM E SR.  
Address: 808 W. ST. AUGUSTINE ST.  
City-St-Zip: TALLAHASSEE, FL 32304

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: ROBERT LEPARULO

MGRM

04/27/2011

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