

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000109561

**FILED**  
**Nov 05, 2010**  
**Secretary of State**

**Entity Name:** JAY LINES TRANSPORTATION, LLC

**Current Principal Place of Business:**

6900 CATER STREET  
BAGDAD, FL 32530 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7633  
BAGDAD, FL 32530 US

**New Mailing Address:**

PO BOX 763  
BAGDAD, FL 32530 US

**FEI Number:** 30-0518697

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LITTLES, CLYDE  
6900 CATER STREET  
BAGDAD, FL 32530 US

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

LITTLES, CLYDE A  
6900 CATER STREET  
BAGDAD, FL 32530 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: CLYDE A. LITTLES

11/05/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LITTLES, CLYDE  
Address: PO BOX 763  
City-St-Zip: BAGDAD, FL 32530 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: CLYDE A. LITTLES

MGRM

11/05/2010

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