

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000010229

Entity Name: JM MEDIA CONCEPTS, LLC

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

116 19TH AVENUE NORTH  
302  
JACKSONVILLE BEACH, FL 32250

## **Current Mailing Address:**

PO BOX 49090  
JACKSONVILLE BEACH, FL 32240

## **New Principal Place of Business:**

2725 NE 8TH AVE.  
104  
WILTON MANORS, FL 33334

## **New Mailing Address:**

2725 NE 8TH AVE.  
104  
WILTON MANORS, FL 33334

FEI Number: 26-4166010

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAYLOR, DEBORAH  
3991 SAINT JOHNS AVENUE  
JACKSONVILLE, FL 32250 US

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

SHERMAN, MARK  
2725 NE 8TH AVE.  
104  
WILTON MANORS, FL 33334 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: MARK SHERMAN

01/04/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SHERMAN, MARK P  
Address: 2725 NE 8TH AVE., #104  
City-St-Zip: WILTON MANORS, FL 33334

Title: VP  
Name: GURLEY-SHERMAN, JENNIFER  
Address: 2725 NE 8TH AVE., #104  
City-St-Zip: WILTON MANORS, FL 33334

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: MARK SHERMAN

MGR

01/04/2011

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