

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000011650

**Entity Name:** SARAH A. BARNES LLC

**FILED**  
**Nov 04, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

5729 SWEET CHERRY LANE  
LAND OF LAKES, FL 34639

**New Principal Place of Business:**

**Current Mailing Address:**

5729 SWEET CHERRY LANE  
LAND OF LAKES, FL 34639

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

BARNES, JOSEPH M  
5729 SWEET CHERRY LANE  
LAND OF LAKES, FL 34639 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: JOSEPH M BARNES

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: BARNES, JOSEPH M  
Address: 5729 SWEET CHERRY LANE  
City-St-Zip: LAND OF LAKES, FL 34639

Title: MGRM  
Name: BARNES(TRUSTEE), JOSEPH M  
Address: 5729 SWEET CHERRY LANE  
City-St-Zip: LAND OF LAKES, FL 34639

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: JOSEPH M BARNES

MGRM

11/04/2014

Electronic Signature of Authorized Person

Date