

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000016498

Entity Name: ELECTRIC DOCTOR LLC

**FILED**  
**Oct 04, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

542 OLD BARTOW/LAKE WALES ROAD  
BARTOW, FL 33830 US

**New Principal Place of Business:**

**Current Mailing Address:**

542 OLD BARTOW/LAKE WALES ROAD  
BARTOW, FL 33830 US

**New Mailing Address:**

PO BOX 5815  
LAKELAND, FL 33807 US

FEI Number: 26-4288774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DERK, RICHARD  
1555 WILLIAMSBURG SQ.  
LAKELAND, FL 33803 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: RICHARD DERK

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SMITH, GLEN M  
Address: P.O. BOX 5815  
City-St-Zip: LAKELAND, FL 33807 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: GLEN SMITH

OWNE

10/04/2010

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