

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000031179

**FILED**  
**Nov 16, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA-GEORGIA CONSULTANTS LLC

**Current Principal Place of Business:**

9191 103 RD ST  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

9191 103 RD ST  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:** 26-4555198

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOPPER, MORRIS THOMAS  
9191 103 RD ST  
JACKSONVILLE, FL 32210 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:** MORRIS THOMAS HOPPER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** HOPPER, MORRIS T  
**Address:** 9191 103 RD ST  
**City-St-Zip:** JACKSONVILLE, FL 32210

**Title:** MGRM  
**Name:** HOPPER, YVONNA R  
**Address:** 9191 103 RD ST  
**City-St-Zip:** JACKSONVILLE, FL 32210

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:** MORRIS THOMAS HOPPER

MGR

11/16/2010

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