

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000056488

**FILED**  
**Feb 15, 2011**  
**Secretary of State**

**Entity Name:** JCM CUSTOM SERVICES LLC

**Current Principal Place of Business:**

2502 TRIANNA STREET  
NORTH PORT, FL 34281 US

**New Principal Place of Business:**

17362 IAGO AVE  
PORT CHARLOTTE, FL 33954 US

**Current Mailing Address:**

2502 TRIANNA STREET  
NORTH PORT, FL 34281 US

**New Mailing Address:**

17362 IAGO AVE  
PORT CHARLOTTE, FL 33954 US

**FEI Number:** 27-1236717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CULBERTSON, JARED  
2502 TRIANNA STREET  
NORTH PORT, FL 34281 US

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

CULBERTSON, JARED  
17362 IAGO AVE  
PORT CHARLOTTE, FL 33954 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: JARED CULBERTSON

02/15/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CULBERTSON, JARED  
Address: 17362 IAGO AVE  
City-St-Zip: PORT CHARLOTTE, FL 33954

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: JARED CULBERTSON

MGRM

02/15/2011

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