

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000056718

**FILED**  
**Aug 20, 2012**  
**Secretary of State**

**Entity Name:** TODD B SMITH LLC

**Current Principal Place of Business:**

7821 REFLECTION COVE DRIVE SUITE 205  
NAPLES, FL 33907

**New Principal Place of Business:**

7821 REFLECTION COVE DRIVE  
205  
FORT MYERS, FL 33907

**Current Mailing Address:**

7821 REFLECTION COVE DRIVE SUITE 205  
NAPLES, FL 33907

**New Mailing Address:**

4001 SANTA BARBARA BLVD  
243  
NAPLES, FL 34104

**FEI Number:** 27-0236627

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLEARY, WILLIAM  
2110 RIVER REACH DRIVE  
NAPLES, FL 34101 US

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

SMITH, TODD B  
4001 SANTA BARBARA BLVD  
243  
NAPLES, FL 34104 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: TODD B SMITH

08/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SMITH, TODD B  
Address: 7821 REFLECTION COVE DRIVE SUITE 205  
City-St-Zip: FORT MYERS, FL 33907

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: TODD B SMITH

MGRM

08/20/2012

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