

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000069539

**FILED**  
**Oct 02, 2013**  
**Secretary of State**

**Entity Name:** FOUNDERS DEVELOPMENT LLC

**Current Principal Place of Business:**

104 S. LAUBER WAY  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 23467  
TAMPA, FL 33623

**New Mailing Address:**

**FEI Number:** 27-0581229

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FAHEY, JOHN P F  
104 S. LAUBER  
TAMPA, FL 33609 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:** JOHN FAHEY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** FAHEY, JOHN P F  
**Address:** 4402 GOLF CLUB LANE  
**City-St-Zip:** TAMPA, FL 33624

**Title:** MGRM  
**Name:** GALAVIS, ANDREW B  
**Address:** 104 S. LAUBER  
**City-St-Zip:** TAMPA, FL 33609

**Title:** MGRM  
**Name:** BAGNALL, CLIFFORD F  
**Address:** 1855 LENAWEE LOOP, # 203  
**City-St-Zip:** NEW PORT RICHEY, FL 34655

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:** ANDREW B. GALAVIS

MGRM

10/02/2013

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