

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000071898

**FILED**  
**Sep 18, 2012**  
**Secretary of State**

**Entity Name:** COSMES OUTBOARD SERVICE LLC

**Current Principal Place of Business:**

44 PELICAN LN  
BIG PINE KEY, FL 33043

**New Principal Place of Business:**

**Current Mailing Address:**

44 PELICAN LN  
BIG PINE KEY, FL 33043

**New Mailing Address:**

**FEI Number:** 58-4690793

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BRESKMAN, SARAH  
44 PELICAN LN  
BIG PINE KEY, FL 33043 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:** SARAH BRESKMAN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** BRESKMAN, SARAH E  
**Address:** 44 PELICAN LN  
**City-St-Zip:** BIG PINE KEY, FL 33043

**Title:** MR  
**Name:** COSME, JUAN L  
**Address:** 44 PELICAN LN  
**City-St-Zip:** BIG PINE KEY, FL 33043

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:** SARAH BRESKMAN

MRS.

09/18/2012

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