

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000078898

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** ASHYBREEZE PUBLISHING LLC

**Current Principal Place of Business:**

5642 LUNKER LANE  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

5642 LUNKER LANE  
TALLAHASSEE, FL 32303

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

THOMAS, LOCKSLEY L  
5642 LUNKER LANE  
TALLAHASSEE, FL 32303 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: LOCKSLEY L THOMAS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: THOMAS, LOCKSLEY L  
Address: 5642 LUNKER LANE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM  
Name: THOMAS, CHRISTOPHER  
Address: 5642 LUNKER LANE  
City-St-Zip: TALLAHASSEE, FL 32303

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: LOCKSLEY L THOMAS

MGRM

02/18/2011

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