

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000085516

Entity Name: MIKE LIVE, LLC

**FILED**  
**Jul 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

94 CHIPPENDALE TERRACE  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

94 CHIPPENDALE TERRACE  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 27-0868301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUTLER, MICHAEL J JR  
94 CHIPPENDALE TERRACE  
OVIEDO, FL 32765 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: MICHAEL J BUTLER JR

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BUTLER, MICHAEL J JR  
Address: 94 CHIPPENDALE TERRACE  
City-St-Zip: OVIEDO, FL 32765

Title: MGRM  
Name: BUTLER, MONICA M  
Address: 94 CHIPPENDALE TERRACE  
City-St-Zip: OVIEDO, FL 32765

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: MICHAEL J BUTLER JR

MGRM

07/28/2011

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