

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000096622

**FILED**  
**Jan 07, 2011**  
**Secretary of State**

**Entity Name:** R PARRISH LLC

**Current Principal Place of Business:**

804 DOUGHERTY ST.  
NEW SMYRNA, FL 32168 US

**New Principal Place of Business:**

**Current Mailing Address:**

804 DOUGHERTY ST.  
NEW SMYRNA, FL 32168 US

**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:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

PARRISH, RONNIE  
804 DOUGHERTY ST  
NEW SMYRNA BEACH, FL 32168 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: RONNIE PARRISH

01/07/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PARRISH, RRONNIE E  
Address: 804 DOUGHERTY ST.  
City-St-Zip: NEW SMYRNA, FL 32168 US

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: RONNIE E PARRISH

MGRM

01/07/2011

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