

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000103281

**Entity Name:** SAFEGIDE NETWORKS LLC

**FILED**  
**Jan 16, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

452 OSCEOLA ST, SUITE 212  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

633 BROOKFIELD PLACE  
APOPKA, FL 32712

**Current Mailing Address:**

633 BROOKFIELD PL.  
APOPKA, FL 32712

**New Mailing Address:**

633 BROOKFIELD PLACE  
APOPKA, FL 32712

**FEI Number:** 27-1193208

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MOSS, JASON  
633 BROOKFIELD PL.  
APOPKA, FL 32712 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:** JASON MOSS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** MOSS, JASON  
**Address:** 633 BROOKFIELD PL.  
**City-St-Zip:** APOPKA, FL 32712 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:** JASON MOSS

CTO

01/16/2013

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