

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000116214

**Entity Name:** FAMM INVESTMENTS, LLC

**FILED**  
**Oct 08, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

193 MAGNOLIA STREET  
GRAYTON BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

193 MAGNOLIA STREET  
GRAYTON BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 27-1755429

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FRANKLIN H. WATSON, P.A.  
5365 E. CO. HWY. 30A  
SUITE 105  
SEAGROVE BEACH, FL 32459 US

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

WATSON SEWELL, PL  
5365 E. CO. HWY. 30A  
SUITE 105  
SEAGROVE BEACH, FL 32459 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: FRANKLIN H. WATSON

10/08/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGMR  
Name: MOULTRIE FAMILY MANAGEMENT, INC.  
Address: 193 MAGNOLIA STREET  
City-St-Zip: GRAYTON BEACH, FL 32459

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: FRANK A. MOULTRIE

PRES

10/08/2010

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