

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000116580

Entity Name: J C ABRAMS, LLC

**FILED**  
**Nov 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5674 SE 47TH AVENUE  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

5674 SE 47TH AVENUE  
STUART, FL 34997

**New Mailing Address:**

FEI Number: 27-2321469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ABRAMS, JEFFREY CLYDE  
5674 SE 47TH AVENUE  
STUART, FL 34997 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: MASON ANTOIN BROWN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ABRAMS, JEFFREY CLYDE  
Address: 5674 SE 47TH AVENUE  
City-St-Zip: STUART, FL 34997

Title: MGRM  
Name: BROWN, MASON ANTOIN  
Address: 613 SW KAYAK AVENUE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: MASON ANTOIN BROWN

MGRM

11/15/2011

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