

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000122641

**FILED**  
**Aug 09, 2013**  
**Secretary of State**

**Entity Name:** AC3 DEVELOPMENT GROUP, LLC

**Current Principal Place of Business:**

3524 TWISTED OAK COURT  
LAKE WALES, FL 33898

**New Principal Place of Business:**

**Current Mailing Address:**

3524 TWISTED OAK COURT  
LAKE WALES, FL 33898

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARSON, WILLIAM S SR.  
3524 TWISTED OAK COURT  
LAKE WALES, FL 33898 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: WILLIAM S. CARSON SR.

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CARSON, WILLIAM S SR.  
Address: 3524 TWISTED OAK COURT  
City-St-Zip: LAKE WALES, FL 33898

Title: MGRM  
Name: CARSON, SYLVIA H  
Address: 3524 TWISTED OAK COURT  
City-St-Zip: LAKE WALES, FL 33898

Title: MGRM  
Name: CARSON, WILLIAM S JR.  
Address: 3524 TWISTED OAK COURT  
City-St-Zip: LAKE WALES, FL 33898

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: WILLIAM S. CARSON SR.

DIR.

08/09/2013

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