

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000003080

Entity Name: 1943 MARAVILLA AVE, LLC

**FILED**  
**Sep 27, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

4346 HARBOUR LN  
NORTH FORT MYERS, 33903

## **New Principal Place of Business:**

4346 HARBOUR LN  
NORTH FORT MYERS, FL 33903

## **Current Mailing Address:**

4346 HARBOUR LN  
NORTH FORT MYERS, 33903

## **New Mailing Address:**

PO BOX 160  
NORTH FORT MYERS, FL 33903

FEI Number: 20-4056024

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORRISSETTE, JAMES P MANAGER  
4346 HARBOUR LN  
NORTH FORT MYERS, FL 33903 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: JAMES P MORRISSETTE

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MORRISSETTE, JAMES P MANAGER  
Address: 4346 HARBOUR LN  
City-St-Zip: NORTH FORT MYERS, FL 33903 50

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: JAMES P MORRISSETTE

MGRM

09/27/2011

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