

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000011253

**FILED**  
**Oct 16, 2014**  
**Secretary of State**

**Entity Name:** SANFORD STEPHENS ENTERPRISES, LLC

**Current Principal Place of Business:**

6934 CARTIER CIRCLE  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

**Current Mailing Address:**

6934 CARTIER CIRCLE  
JACKSONVILLE, FL 32208

**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:**

STEPHENS, SANFORD  
6934 CARTIER CIRCLE  
JACKSONVILLE, FL 32208 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:** SANFORD A STEPHENS

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

**Title:** MGR  
**Name:** STEPHENS, SANFORD A  
**Address:** 6934 CARTIER CIRCLE  
**City-St-Zip:** JACKSONVILLE, FL 32208

**Title:** ASST  
**Name:** CYLER, KATINA  
**Address:** 7727 LANKERSHIM BLVD #307  
**City-St-Zip:** NORTH HOLLYWOOD, CA 91605

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

**SIGNATURE:** SANFORD A STEPHENS

MGR

10/16/2014

Electronic Signature of Authorized Person

Date