

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000013488

**FILED**  
**Apr 13, 2013**  
**Secretary of State**

**Entity Name:** LAWN TRANSFORMERS LLC

**Current Principal Place of Business:**

515 PALMER ST.  
GREEN COVE SPRINGS, FL 32043 US

**New Principal Place of Business:**

4814 DALE CT  
MIDDLEBURG, FL 32043 US

**Current Mailing Address:**

P.O BOX 0091  
GREEN COVE SPRINGS, FL 32043 US

**New Mailing Address:**

4814 DALE CT  
MIDDLEBURG, FL 32068 US

**FEI Number:** 80-0541425

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NICKS,, DEWEY A SR  
515 PALMER ST.  
GREEN COVE SPRINGS, FL 32043 US

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

NICKS,, DEWEY A SR  
4814 DALE CT  
MIDDLEBURG, FL 32068 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: DEWEY A NICKS

04/13/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: NICKS, DEWEY A SR.  
Address: 4814 DALE CT  
City-St-Zip: MIDDLEBURG, FL 32068 US

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: DEWEY A NICKS

MGR

04/13/2013

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