

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000015686

**FILED**  
**Oct 11, 2012**  
**Secretary of State**

**Entity Name:** TIME 2 SHINE ENTERTAINMENT LLC

**Current Principal Place of Business:**

5521 ALDENBRIDGE DR.  
JACKSONVILLE, FL 32258 US

**New Principal Place of Business:**

12549 HIDDEN GARDENS DR. WEST  
JACKSONVILLE, FL 32258 US

**Current Mailing Address:**

5521 ALDENBRIDGE DR.  
JACKSONVILLE, FL 32258 US

**New Mailing Address:**

12549 HIDDEN GARDENS DR. WEST  
JACKSONVILLE, FL 32258 US

**FEI Number:** 27-1910642

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BELL, AQUILIS  
5521 ALDENBRIDGE DR.  
JACKSONVILLE, FL 32258 US

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

BELL, AQUILIS  
12549 HIDDEN GARDENS DR. WEST  
JACKSONVILLE, FL 32258 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: AQUILIS BELL

10/11/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BELL, AQUILIS  
Address: 12549 HIDDEN GARDENS DR. WEST  
City-St-Zip: JACKSONVILLE, FL 32258 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: AQUILIS BELL

MGRM

10/11/2012

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