

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000062514

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** S P BRISCOE LOGISTICS LLC

**Current Principal Place of Business:**

1798 SHADOW VIEW CIRCLE  
MAITLAND, FL 32751

**New Principal Place of Business:**

1798 SHADOW VIEW CIRCLE  
MAITLAND, FL 32751 UN

**Current Mailing Address:**

1798 SHADOW VIEW CIRCLE  
MAITLAND, FL 32751

**New Mailing Address:**

**FEI Number:** 27-2856149

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRISCOE, SAMUEL P  
1798 SHADOW VIEW CIR  
MAITLAND, FL 32751 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: SAMUEL BRISCOE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BRISCOE, SAMUEL P  
Address: 1798 SHADOW VIEW CIRCLE  
City-St-Zip: MAITLAND, FL 32751

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: SAMUEL BRISCOE

MGRM

04/27/2012

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