

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000068437

**FILED**  
**Nov 01, 2011**  
**Secretary of State**

**Entity Name:** NO BOUNDARIES VENTURES, LLC

**Current Principal Place of Business:**

402 NORTH 22ND STREET  
TAMPA, FL 33605

**New Principal Place of Business:**

**Current Mailing Address:**

402 NORTH 22ND STREET  
TAMPA, FL 33605

**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:**

REDDICK, DENISE  
402 NORTH 22ND STREET  
TAMPA, FL 33605 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: DENISE REDDICK

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: REDDICK, DENISE  
Address: 402 NORTH 22ND STREET  
City-St-Zip: TAMPA, FL 33605

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: DENISE REDDICK

MGRM

11/01/2011

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