

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000117156

**FILED**  
**Jul 10, 2012**  
**Secretary of State**

**Entity Name:** A 1 PARTNER HOLDINGS LLC

**Current Principal Place of Business:**

412 SEABREEZE BLVD  
DAYTONA BEACH, FL 32118

**New Principal Place of Business:**

77 BECON TREE CT  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

412 SEABREEZE BLVD  
DAYTONA BEACH, FL 32118

**New Mailing Address:**

77 BECON TREE CT  
ORMOND BEACH, FL 32174

**FEI Number:** 27-3984696

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GOODMAN, CRAIG JR  
412 SEABREEZE BLVD  
DAYTONA BEACH, FL 32118 US

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

GOODMAN, CRAIG JR  
77 BECON TREE CT  
ORMOND BEACH, FL 32174 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: CRAIG GOODMAN

07/10/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GOODMAN, CRAIG JR  
Address: 77 BECON TREE CT  
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM  
Name: GOODMAN, SARAH E  
Address: 77 BECON TREE CT  
City-St-Zip: ORMOND BEACH, FL 32174

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: CRAIG GOODMAN

MGRM

07/10/2012

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