

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000119313

**FILED**  
**Nov 20, 2013**  
**Secretary of State**

**Entity Name:** FLEXCIN MANUFACTURING LLC

**Current Principal Place of Business:**

2659 NE 9TH AVE  
CAPE CORAL, FL 33909 US

**New Principal Place of Business:**

**Current Mailing Address:**

2659 NE 9TH AVE  
CAPE CORAL, FL 33909 US

**New Mailing Address:**

**FEI Number:** 27-3977234

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ELSAFY, TAMER  
2659 NE 9TH AVE  
CAPE CORAL, FL 33909 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: TAMER ELSAFY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ELSAFY, TAMER  
Address: 2659 NE 9TH AVE  
City-St-Zip: CAPE CORAL, FL 33909 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: TAMER ELSAFY

P

11/20/2013

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