

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000123519

**Entity Name:** A M MULTISERVICES LLC

**FILED**  
**Oct 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1461 VENDOME CT  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

1461 VENDOME CT  
CAPE CORAL, FL 33904

**New Mailing Address:**

**FEI Number:** 27-4151918

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAMIAN, AURA A  
1461 VENDOME CT  
CAPE CORAL, FL 33904 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: AURA A MAMIAN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MAMIAN, AURA A  
Address: 1461 VENDOME CT  
City-St-Zip: CAPE CORAL, FL 33904

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: AURA A MAMIAN

MGRM

10/05/2012

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