

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000129394

**FILED**  
**Sep 29, 2014**  
**Secretary of State**

**Entity Name:** REHOBOTH VENTURES LLC

**Current Principal Place of Business:**

2771 MONUMENT RD  
29-219  
JACKSONVILLE, FL 32225 US

**New Principal Place of Business:**

962 N ST. JOHN'S BLUFF RD  
JACKSONVILLE, FL 32225 US

**Current Mailing Address:**

P.O.BOX 351628  
JACKSONVILLE, FL 32235 US

**New Mailing Address:**

**FEI Number:** 27-4321910

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BANKOLE, ADEOLA  
2771 MONUMENT RD  
29-219  
JACKSONVILLE, FL 32225 US

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

BANKOLE, ADEOLA  
962 N ST. JOHN'S BLUFF RD  
JACKSONVILLE, FL 32225 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: ADEOLA BANKOLE

09/29/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: BANKOLE, ADEOLA  
Address: 962 N ST JOHN'S BLUFF RD  
City-St-Zip: JACKSONVILLE, FL 32225

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: ADEOLA BANKOLE

MGRM

09/29/2014

Electronic Signature of Authorized Person

Date