

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000011610

**FILED**  
**Sep 08, 2014**  
**Secretary of State**

**Entity Name:** TIMBER RIDGE MANAGEMENT LLC

**Current Principal Place of Business:**

4460 TIMBER RIDGE LANE  
FORT PIERCE, FL 34953 US

**New Principal Place of Business:**

**Current Mailing Address:**

4460 TIMBER RIDGE LANE  
FORT PIERCE, FL 34953 US

**New Mailing Address:**

2139 BRUNCKNER BLVD  
BRONX, NY 34953 US

**FEI Number:** 27-4674548

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TOOLSEE, SEWRANIE  
4460 TIMBER RIDGE LANE  
FORT PIERCE, FL 34953 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:** SEWRANIE TOOLSEE

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

**Title:** MGR  
**Name:** TOOLSEE, SEWRANIE  
**Address:** 4460 TIMBER RIDGE LANE  
**City-St-Zip:** FORT PIERCE, FL 34953 US

**Title:** MGR  
**Name:** KHAN, ASHLEY N  
**Address:** 4277 SW SAVONA BLVD  
**City-St-Zip:** PORT ST LUCIE, FL 34953 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

**SIGNATURE:** SEWRANIE TOOLSEE

MGR

09/08/2014

Electronic Signature of Authorized Person

Date