

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000019735

**FILED**  
**Oct 02, 2014**  
**Secretary of State**

**Entity Name:** ATTORNEY CARL R. HAYES, LLC

**Current Principal Place of Business:**

308 E DR. M.L. KING BLVD., SUITE E  
TAMPA, FL 33603

**New Principal Place of Business:**

**Current Mailing Address:**

308 E DR. M.L. KING BLVD., SUITE E  
TAMPA, FL 33603

**New Mailing Address:**

**FEI Number:** 59-3736452

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAYES, CARL R  
308 E DR. M.L. KING BLVD., SUITE E  
TAMPA, FL 33603 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: CARL R. HAYES

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

\_\_\_\_\_  
Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: HAYES, CARL  
Address: 308 E DR. M.L. KING BLVD., SUITE E  
City-St-Zip: TAMPA, FL 33603

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: CARL R. HAYES

PRES

10/02/2014

\_\_\_\_\_  
Electronic Signature of Authorized Person

\_\_\_\_\_  
Date