

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000053374

**FILED**  
**Apr 03, 2013**  
**Secretary of State**

**Entity Name:** J. NORMAN MANAGEMENT LLC

**Current Principal Place of Business:**

3910 ST. JOHNS PARKWAY  
SANFORD, FL 32771

**New Principal Place of Business:**

1210 CENTRAL PARK DRIVE  
SANFORD, FL 32771

**Current Mailing Address:**

836 WOOD BRIAR LOOP  
SANFORD, FL 32771

**New Mailing Address:**

878 OAKBRANCH PLACE  
SANFORD, FL 32771

**FEI Number:** 45-2094096

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRYANT, CHERYL  
836 WOOD BRIAR LOOP  
SANFORD, FL 32771 US

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

BRYANT, CHERYL  
878 OAKBRANCH PLACE  
SANFORD, FL 32771 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: CHERYL BRYANT

04/03/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BRYANT, CHERYL  
Address: 878 OAKBRANCH PLACE  
City-St-Zip: SANFORD, FL 32771

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: CHERYL BRYANT

MGRM

04/03/2013

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