

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000069565

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

**Entity Name:** WEAPON ENHANCEMENT SOLUTIONS LLC

**Current Principal Place of Business:**

6120 POWERS AVE., SUITE #3  
JACKSONVILLE, FL 32217 US

**New Principal Place of Business:**

**Current Mailing Address:**

6120 POWERS AVE., SUITE #3  
JACKSONVILLE, FL 32217 US

**New Mailing Address:**

**FEI Number:** 45-2531273

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SEARS, CHARLES A CPA  
2011 GIBSON ROAD  
JACKSONVILLE, FL 32207 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:** RICHARD W. PALMER

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

**Title:** MGRM  
**Name:** HUGGINS, ROGER W  
**Address:** 6840 MANNING CEMETERY ROAD  
**City-St-Zip:** JACKSONVILLE, FL 32217

**Title:** MGR  
**Name:** PALMER, RICHARD W  
**Address:** 6120 POWERS AVE #2  
**City-St-Zip:** JACKSONVILLE, FL 32202

**Title:** MGRM  
**Name:** PALMER, KENNETH W SR  
**Address:** 6120 POWERS AVE#3  
**City-St-Zip:** JACKSONVILLE, FL 32217

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:** RICHARD W. PALMER

CEO

01/02/2014

Electronic Signature of Authorized Person

Date