

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L11000074134

1. Entity Name
J. ELLIS CONSTRUCTION LLC



FILED

13 MAY 23 AM 8:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2199 OLD LLOYD RD
MONTICELLO, FL 32344 US

Mailing Address
2199 OLD LLOYD RD
MONTICELLO, FL 32344 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

PO Box 720

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Monticello FL

Zip

Country

Zip

Country

32345

Jefferson

05232013 REIN-LLC CR2E101 (12/11)

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ELLIS, JOHNNY
2199 OLD LLOYD RD
MONTICELLO, FL 32344

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Johnny Ellis

(NOTE: Registered Agent signature required when reinstating)

5-23-13

DATE

FILE NOW!!! FEE IS \$377.50

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGRM
ELLIS, JOHNNY
2199 OLD LLOYD RD
MONTICELLO, FL 32344

☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

800248209638
05/23/13--01004--001 **377.50

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Johnny Ellis

5-23-13

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date

E-MAIL ADDRESS

26 5/23/13