

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000075023

Entity Name: JABZ CONSULTING LLC

**FILED**  
**Feb 08, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

8594 IRIS AVE.  
LARGO, FL 33777

**New Principal Place of Business:**

**Current Mailing Address:**

8594 IRIS AVE.  
LARGO, FL 33777

**New Mailing Address:**

FEI Number: 45-2789090

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BEHROOZI, GOODARZ  
8594 IRIS AVE.  
LARGO, FL 33777 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: GOODAR BEHROOZI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BEHROOZI, GOODARZ MR  
Address: 8594 IRIS AVE.  
City-St-Zip: LARGO, FL 33777

Title: MGR  
Name: JABON BEHROOZI, YOLETTE MRS  
Address: 8594 IRIS AVE.  
City-St-Zip: LARGO, FL 33777

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: GOODARZ BEHROOZI

MGR

02/08/2013

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