

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000093686

**Entity Name:** ED WOFFORD, LLC

**FILED**  
**Jun 10, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

212 BEAL PKWY NW  
FORT WALTON BEACH, FL 32548 US

**New Principal Place of Business:**

**Current Mailing Address:**

212 BEAL PKWY NW  
FORT WALTON BEACH, FL 32548 US

**New Mailing Address:**

**FEI Number:** 45-3007600

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOFFORD, ROBERT E II  
212 BEAL PKWY NW  
FORT WALTON BEACH, FL 32548 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: ROBERT E> WOFFORD II

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WOFFORD, ROBERT E II  
Address: 212 BEAL PKWY NW  
City-St-Zip: FORT WALTON BEACH, FL 32548 US

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: ROBERT E. WOFFORD II

MR.

06/10/2013

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