

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000114295

Entity Name: H.O.P.E. 4 YOU, LLC

**FILED**  
**Oct 30, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

290 PARADISE BLVD.  
SUITE 84  
INDIALANTIC, FL 32903 US

**New Principal Place of Business:**

**Current Mailing Address:**

290 PARADISE BLVD.  
SUITE 84  
INDIALANTIC, FL 32903 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

HARTRANFT, WILLIAM  
290 PARADISE BLVD.  
SUITE 84  
INDIALANTIC, FL 32903 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: WILLIAM HARTRANFT

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: AMBR  
Name: HARTRANFT, WILLIAM  
Address: 290 PARADISE BLVD., SUITE 84  
City-St-Zip: INDIALANTIC, FL 32903 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: WILLIAM HARTRANFT

AMBR

10/30/2014

Electronic Signature of Authorized Person

Date