

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000124995

**Entity Name:** INTERMAX , LLC

**FILED**  
**Oct 06, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

4836 FIORAZANTE AVE.  
4836  
ORLANDO, FL 32839

**New Principal Place of Business:**

**Current Mailing Address:**

4836 FIORAZANTE AVE.  
4836  
ORLANDO, FL 32839

**New Mailing Address:**

**FEI Number:** 45-3558630

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BREA, ANA E  
3526 MAPLE RIDGE LOOP  
3526  
KISSIMMEE, FL 34741 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: ANA BREA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PARRA, SERGIO A SR.  
Address: 4836 FIORAZANTE AVE.  
City-St-Zip: ORLANDO, FL 32839 US

Title: MGRM  
Name: PARRA, FRANCISCO A SR.  
Address: 4836 FIORAZANTE AVE.  
City-St-Zip: ORLANDO, FL 32839 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: SERGIO PARRA

MGRM

10/06/2013

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