

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000000982

Entity Name: 431 PALM AVE LLC

**FILED**  
**Oct 26, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

431 PALM AVE  
BOCA GRANDE, FL 33921

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 31  
BOCA GRANDE, FL 33921

**New Mailing Address:**

FEI Number: 45-4145536

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CURRY, JAMIE  
431 PALM AVE  
BOCA GRANDE, FL 33921 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: JAMIE CURRY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: INGRAM, KATHERINE P  
Address: 431 PALM AVE  
City-St-Zip: BOCA GRANDE, FL 33921

Title: MGR  
Name: INGRAM, MARY M  
Address: 431 PALM AVE  
City-St-Zip: BOCA GRANDE, FL 33921

Title: PT  
Name: INGRAM, MARY M  
Address: 431 PALM AVE  
City-St-Zip: BOCA GRANDE, FL 33921

Title: VS  
Name: INGRAM, KATHRINE P  
Address: 431 PALM AVE  
City-St-Zip: BOCA GRANDE, FL 33921

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: MARY M. INGRAM

MGR

10/26/2013

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