

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000127620

Entity Name: GAVON REALTY, LLC

**FILED**  
**Oct 22, 2013**  
**Secretary of State**

## **Current Principal Place of Business:**

530 S. COLLIER BLVD  
UNIT 202  
MARCO ISLAND, FL 34145

## **New Principal Place of Business:**

3983 MANNIX DRIVE  
#522  
NAPLES, FL 34114

## **Current Mailing Address:**

530 S. COLLIER BLVD  
UNIT 202  
MARCO ISLAND, FL 34145

## **New Mailing Address:**

3983 MANNIX DRIVE  
#522  
NAPLES, FL 34114

FEI Number: 46-1530446

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PELOW, TODD  
530 S. COLLIER BLVD  
UNIT 202  
MARCO ISLAND, FL 34145 US

## **Name and Address of New Registered Agent:**

PELOW, TODD  
3983 MANNIX DRIVE  
#522  
NAPLES, FL 34114 US

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: TODD PELOW

10/22/2013

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PELOW, TODD  
Address: 3983 MANNIX DRIVE, #522  
City-St-Zip: NAPLES, FL 34114

Title: MGRM  
Name: PELOW, JODIE L  
Address: 3983 MANNIX DRIVE #522  
City-St-Zip: NAPLES, FL 34114

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: TODD PELOW

MGRM

10/22/2013

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