

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000009302

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

**Entity Name:** FIRST COAST APPLIANCE LLC

**Current Principal Place of Business:**

5880 MACY AVENUE  
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

**Current Mailing Address:**

5880 MACY AVENUE  
JACKSONVILLE, FL 32211

**New Mailing Address:**

**FEI Number:** 46-1802851

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCLENAHAN, TOM  
9770 OLD BAYMEADOWS RD  
103  
JACKSONVILLE, FL 32256 US

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

MORRIS, TIM  
117 BURNING PINE CT  
PONTE VEDRA BEACH, FL 32082 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: TIM MORRIS

10/30/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: MORRIS, JEFF A  
Address: 22 KEVIN CT  
City-St-Zip: ASHEVILLE, NC 28801

Title: MGR  
Name: MORRIS, TIM T  
Address: 117 BURNING PINE COURT  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: TIM MORRIS

OWN

10/30/2014

Electronic Signature of Authorized Person

Date