

# 2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L13000030765

**FILED**  
**Oct 02, 2014**  
**Secretary of State**

**Entity Name:** ZZIPIT, LLC

**Current Principal Place of Business:**

3810 HOLLOW WOOD DR  
VALRICO, FL 33596

**New Principal Place of Business:**

**Current Mailing Address:**

3810 HOLLOW WOOD DR  
VALRICO, FL 33596

**New Mailing Address:**

**FEI Number:** 90-0942299

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DISMUKE, RONALD M  
3810 HOLLOW WOOD DR.  
VALRICO, FL 33596 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: RONALD DISMUKE

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

\_\_\_\_\_  
Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: DISMUKE, RONALD M  
Address: 3810 HOLLOW WOOD DR  
City-St-Zip: VALRICO, FL 33596

Title: MGR  
Name: DISMUKE, ESSIE L  
Address: 3810 HOLLOW WOOD DR  
City-St-Zip: VALRICO, FL 33596

Title: MGRM  
Name: DISMUKE, RONALD M  
Address: 3810 HOLLOW WOOD DR  
City-St-Zip: VALRICO, FL 33596

Title: MGRM  
Name: DISMUKE, ESSIE L  
Address: 3810 HOLLOW WOOD DR  
City-St-Zip: VALRICO, FL 33596 FL

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: RONALD DISMUKE

\_\_\_\_\_  
Electronic Signature of Authorized Person

OWNE

10/02/2014

\_\_\_\_\_  
Date