

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000088459

**Entity Name:** PALEOEFFECT, LLC

**FILED**  
**Oct 24, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

5W FORSYTH ST.  
SUITE 200  
FLORIDA, FL 32202 US

**New Principal Place of Business:**

**Current Mailing Address:**

5W FORSYTH ST.  
SUITE 200  
FLORIDA, FL 32202 US

**New Mailing Address:**

**FEI Number:** 46-3774441

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AYALA TORRES, ANGEL F  
5W FORSYTH ST.  
SUITE 200  
JACKSONVILLE, FL 32202 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:** ANGEL AYALA TORRES

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

**Title:** MGR  
**Name:** AYALA TORRES, ANGEL F  
**Address:** 5W FORSYTH ST. SUITE 200  
**City-St-Zip:** FLORIDA, FL 32202 US

**Title:** MGR  
**Name:** LITTLE, MEGHAN A  
**Address:** 5W FORSYTH ST. SUITE 200  
**City-St-Zip:** FLORIDA, FL 32202 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

**SIGNATURE:** ANGEL AYALA TORRES

MGR

10/24/2014

Electronic Signature of Authorized Person

Date