

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000173555

Entity Name: MF 1285 LLC

**FILED**  
**Oct 15, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

1285 S. STATE ROAD #7  
FORT LAUDERDALE, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

564 WEST DAYTON CIRCLE  
FORT LAUDERDALE, FL 33312

**New Mailing Address:**

FEI Number: 46-4415424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MOORMAN, LUKE  
913 S.W. 19TH STREET  
FORT LAUDERDALE, FL 33315 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: LUKE MOORMAN

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: MOORMAN, ROBERT JR.  
Address: 564 WEST DAYTON CIRCLE  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: MGRM  
Name: MOORMAN, BARBARA  
Address: 564 WEST DAYTON CIRCLE  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: MGRM  
Name: MOORMAN, LUKE  
Address: 913 S.W. 19TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: MGRM  
Name: MOORMAN, ROBERT III  
Address: 5041 S.W. 10 STREET  
City-St-Zip: PLANTATION, FL 33317

Title: MGRM  
Name: MOORMAN, MARK  
Address: 4310 8TH STREET NE  
City-St-Zip: NAPLES, FL 34120

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: LUKE MOORMAN

MGRM

10/15/2014

Electronic Signature of Authorized Person

Date