

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M04000003347

Entity Name: JEFFERSON RD., LLC

FILED  
Jan 20, 2006  
Secretary of State

**Current Principal Place of Business:**

53 JEFFERSON RD.  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

53 JEFFERSON RD.  
JACKSONVILLE, FL 32225

**New Mailing Address:**

2839 PACES FERRY ROAD  
560  
ATLANTA, GA 30339

FEI Number: 74-3102911      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

RIORDAN, MARY L  
210 ST. JOHN'S BLUFF ROAD  
JACKSONVILLE, FL 32246      US

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

WEATHERLY, JOE  
3162 ST. JOHN'S BLUFF ROAD  
JACKSONVILLE, FL 32246      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: JOE WEATHERLY

01/20/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: WEATHERFORD, WILLIAM B  
Address: 2839 PACES FERRY RD. SUITE 560  
City-St-Zip: ATLANTA, GA 30339

Title: MGR      ( ) Delete  
Name: BOWEN, WILLIAM D  
Address: 2839 PACES FERRY RD. SUITE 560  
City-St-Zip: ATLANTA, GA 30339

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: WILLIAM D. BOWEN

MGR

01/20/2006

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