

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M07000000066

**FILED**  
**Oct 10, 2013**  
**Secretary of State**

**Entity Name:** TRANSCENDENT TECHNOLOGIES, LLC

**Current Principal Place of Business:**

1105 SEAWAY DRIVE  
SUITE C  
FT. PIERCE, FL 34949

**New Principal Place of Business:**

**Current Mailing Address:**

1105 SEAWAY DRIVE  
SUITE C  
FT. PIERCE, FL 34949

**New Mailing Address:**

**FEI Number:** 11-3746566

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KVILHAUG, JAMES  
1105 SEAWAY DRIVE  
SUITE C  
FT. PIERCE, FL 34949 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:** JAMES KVILHAUG

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** KVILHAUG, JAMES  
**Address:** 1105 SEAWAY , SUITE C  
**City-St-Zip:** FT. PIERCE, FL 34949

**Title:** MGRM  
**Name:** GAMBLE, GARY  
**Address:** 1511 AVE. M  
**City-St-Zip:** FORT PIERCE, FL 34950

**Title:** MGRM  
**Name:** ADAMS, LEWIS  
**Address:** 2007 51ST CT.  
**City-St-Zip:** FT. PIERCE, FL 34982

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 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:** JAMES KVILHAUG

MGR

10/10/2013

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