

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M10000003150

**FILED**  
**Oct 01, 2013**  
**Secretary of State**

**Entity Name:** LINDSEY MEADS, LLC

**Current Principal Place of Business:**

510 EVERNIA STREET  
WEST PALM BEACH, FL 33401 US

**New Principal Place of Business:**

**Current Mailing Address:**

510 EVERNIA STREET  
WEST PALM BEACH, FL 33401 US

**New Mailing Address:**

1043 WILLIAMS TRACE  
BIRMINGHAM, AL 35242 US

**FEI Number:** 26-422259

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CAPITOL CORPORATE SERVICES, INC.  
155 OFFICE PLAZA DRIVE, SUITE A  
TALLAHASSEE, FL 32301 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:** VICKI MEADS

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** LINDSEY, KARA ANNE  
**Address:** 1043 WILLIAMS TRACE  
**City-St-Zip:** BIRMINGHAM, AL 35242

**Title:** MGR  
**Name:** MEADS, VICKI  
**Address:** 1043 WILLIAMS TRACE  
**City-St-Zip:** BIRMINGHAM, AL 35242

**Title:** MGR  
**Name:** LINDSEY, KATHERINE  
**Address:** 1043 WILLIAMS TRACE  
**City-St-Zip:** BIRMINGHAM, AL 35242

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:** VICKI MEADS

MGR

10/01/2013

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