

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000108252

**Entity Name:** LIVABLE STREETS, INC.

**FILED**  
**Oct 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

400 N. ASHLEY DRIVE  
SUITE 1010  
TAMPA, FL 33602

**New Principal Place of Business:**

116 NEW MONTGOMERY STREET  
SUITE 500  
SAN FRANCISCO, CA 94105

**Current Mailing Address:**

400 N. ASHLEY DRIVE  
SUITE 1010  
TAMPA, FL 33602

**New Mailing Address:**

116 NEW MONTGOMERY STREET  
SUITE 500  
SAN FRANCISCO, CA 94105

**FEI Number:** 41-2062954

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOULE, MICHAEL M  
1426 HARBOUR WALK ROAD  
TAMPA, FL 33602 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: MICHAEL M MOULE

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PDST  
Name: MOULE, MICHAEL M  
Address: 1426 HARBOUR WALK ROAD  
City-St-Zip: TAMPA, FL 33602

Title: VD  
Name: HILL, JENNIFER J  
Address: 2820 UNION STREET  
City-St-Zip: SAN FRANCISCO, CA 94123

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL M MOULE

PDST

10/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date