

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000102855

**FILED**  
**Oct 17, 2012**  
**Secretary of State**

**Entity Name:** LAW OFFICES OF JONATHON MARNE, P.A.

**Current Principal Place of Business:**

320 SOUTH-EAST 9TH STREET  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

423 N. E. 16 AVE  
FORTLAUDERDALE, FL 33301

**New Mailing Address:**

2643 ARBOR DRIVE  
FORTLAUDERDALE, FL 33316

**FEI Number:** 65-0881024

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARNE, JONATHON ESQ.  
423 N.E. 16TH AVE  
FORT LAUDERDALE, FL 33301 US

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

MARNE, JONATHON ESQ.  
2643 ARBOR DRIVE  
FORT LAUDERDALE, FL 33316 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: JONATHON MARNE

Electronic Signature of Registered Agent

10/17/2012

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MARNE, JONATHON ESQ.  
Address: 2643 ARBOR DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33316

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: JONATHON MARNE

Electronic Signature of Signing Officer or Director

D

10/17/2012

Date