

**2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000112247

**Entity Name:** SHANNON MATHEWS, LLC

**Current Principal Place of Business:**

415 S. OREGON AVE  
TAMPA, FL 33606

**Current Mailing Address:**

415 S. OREGON AVE  
TAMPA, FL 33606 US

**FEI Number:** 26-3418112

**Certificate of Status Desired:** No

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

MATHEWS, SHANNON R  
415 S. OREGON AVE  
TAMPA, FL 33606 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:** SHANNON R MATHEWS

10/11/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            MATHEWS, SHANNON  
Address        415 S. OREGON AVE  
City-State-Zip: TAMPA FL 33606

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHANNON R MATHEWS

OWNER

10/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date