

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000177515

Entity Name: PRIME RESTORATION, LLC

Current Principal Place of Business:

2720 PARK STREET
STE. 213
JACKSONVILLE, FL 32205

Current Mailing Address:

2720 PARK STREET
STE. 213
JACKSONVILLE, FL 32205

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YOKAN, MICHAEL R
2720 PARK STREET
STE. 213
JACKSONVILLE, FL 32205 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name RICHARDSON, STEPHEN M
Address 2822 ST JOHNS AVE.
City-State-Zip: JACKSONVILLE FL 32205

Title MGRM
Name YOKAN, MICHAEL R
Address 2720 PARK STREET, STE. 213
City-State-Zip: JACKSONVILLE FL 32205

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: MICHAEL R. YOKAN

MGRM

01/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date