## 2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L14000159977

Entity Name: ABERA & PARKER ASSOCIATES LLC;

**Current Principal Place of Business:** 

2319 BETHUNE AVE JACKSONVILLE, FL 32207

**Current Mailing Address:** 

2319 BETHUNE AVE

JACKSONVILLE, FL 32207

FEI Number: 47-2211582 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHESTNUT, ERICKA R 2319 BETHUNE AVE JACKSONVILLE, FL 32207 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: ERICKA R CHESTNUT 12/13/2018

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title AR Title AR

GIBBS, AMIE MARIE Name SANTIAGO, LUIS M Name

8985 NORMANDY BLVD #19 Address 12518 GENTLE KNOLL CT. Address City-State-Zip: JACKSONVILLE FL 32258 JACKSONVILLE FL 32221

Title **TRES** Title AP

Name ABERA, MAARE Name WALL, ANNE M Address 3610 BEACH BLVD Address 1213 SOUTH H STREET

JACKSONVILLE FL 32207 City-State-Zip: City-State-Zip: INDIANOLA IA 50125

Title MANAGER

City-State-Zip:

CHESTNUT, ERICKA REGINA Name

2319 BETHUNE AVE Address

City-State-Zip: JACKSONVILLE FL 32207

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: ERICKA R CHESTNUT

Electronic Signature of Signing Authorized Person(s) Detail

**MANAGER** 

12/13/2018 Date

**FILED** Dec 13, 2018

**Secretary of State** 

CR6324450398

Date