

2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L16000167063

Entity Name: RESTAURANT CLINIC & FIRE PROTECTION LLC

Current Principal Place of Business:

4360 NW 5TH PLACE
PLANTATION, FL 33317

Current Mailing Address:

4360 NW 5TH PLACE
PLANTATION, FL 33317 US

FEI Number: 81-2785570

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARTLEY, LEROY
13302 WINDING OAK COURT
A
TAMPA, FL 33612 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: LEROY BARTLEY

10/05/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	AMBR	Title	MGR
Name	BARTLEY, LEROY A	Name	BARTLEY, LEROY A
Address	4360 NW 5TH PLACE	Address	4360 NW 5TH PLACE
City-State-Zip:	PLANTATION FL 33317	City-State-Zip:	PLANTATION FL 33317
Title	MGR		
Name	PORTER, ANSECIA		
Address	4360 NW 5TH PLACE		
City-State-Zip:	PLANTATION FL 33317		

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: LEROY BARTLEY

MANAGING MEMBER

10/05/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date