

**2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L16000213761

**Entity Name:** MADISON WELLS, PLLC

**Current Principal Place of Business:**

8268 US HWY 301 N  
PARRISH, FL 34219

**Current Mailing Address:**

703 POINSETTIA AVENUE  
ELLENTON, FL 34222 US

**FEI Number:** 37-1844177

**Certificate of Status Desired:** No

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

SMITH, THOMAS  
254 BEACON HARBOUR LOOP  
BRADENTON, FL 34212 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:** THOMAS SMITH

10/06/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name WELLS, MADISON  
Address 1114 4TH ST W  
City-State-Zip: PALMETTO FL 34221

*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:** MADISON WELLS

10/06/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date