

**2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L19000287203

**Entity Name:** GAYLORD CAPITAL LLC

**Current Principal Place of Business:**

4929 SKYWAY DRIVE  
APT 6309  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

46 HOLLY RIDGE ROAD  
NORTH ANDOVER, MA 01845 US

**FEI Number:** 84-3723708

**Certificate of Status Desired:** No

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

BODET, PAUL G  
4929 SKYWAY DRIVE  
APT 6309  
JACKSONVILLE, FL 32246 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:** PAUL BODET

11/11/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AP  
Name BODET, PAUL G  
Address 4929 SKYWAY DRIVE, APT 6309  
City-State-Zip: JACKSONVILLE FL 32246

*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:** PAUL BODET

OWNER

11/11/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date