


# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

BK

FILED  
2006 JAN 24 PM 4:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L04000070091			
1. Entity Name UNITED AMERICAN TOBACCO COMPANY, LLC			
Principal Place of Business 1825 N.W. 167TH AVENUE PEMBROKE PINES, FL 33028		Mailing Address 1825 N.W. 167TH AVENUE PEMBROKE PINES, FL 33028	
2. Principal Place of Business 1291 B NW 65 <sup>TH</sup> PLACE Suite, Apt. #, etc.		3. Mailing Address 1291 B NW 65 <sup>TH</sup> PLACE Suite, Apt. #, etc.	
City & State FORT LAUDERDALE FL 33309		City & State FT LAUDERDALE FL 33309	
Zip 33309	Country BROWARD	Zip 33309	Country BROWARD
6. Name and Address of Current Registered Agent BATTAH, BAIL 1825 N.W. 167TH AVENUE PEMBROKE PINES, FL 33028		7. Name and Address of New Registered Agent Name Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street City Tallahassee FL Zip Code 32301	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Cynthia L. Harris</u> as its agent DATE <u>1/24/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature is required when reinstating)</small>			
FILE NOW!!! FEE IS \$210.00		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BATTAH, BASIL 1825 N.W. 167TH AVENUE PEMBROKE PINES, FL 33028 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.			
SIGNATURE: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		DATE: <u>1/23/06</u> <small>Date Daytime Phone #</small>	

500064380505



01232006 REIN-LLC CR2E101 (11/05)

BK

REINSTATEMENT 2005-2006



L04000070091

CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 827090 7517710

AUTHORIZATION

*Spuddeus*

COST LIMIT : \$200.00

ORDER DATE : January 23, 2006

ORDER TIME : 9:06 AM

ORDER NO. : 827090-005

CUSTOMER NO: 7517710

*BK*

FILED  
2006 JAN 24 PM 4:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: UNITED AMERICAN TOBACCO  
COMPANY, LLC

RECEIVED  
06 JAN 24 AM 10:52  
DIVISION OF CORPORATION

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - Ext# 2949

EXAMINER'S INITIALS \_\_\_\_\_