

**2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
May 03, 2011  
Secretary of State**

DOCUMENT# L06000002722

Entity Name: ALBERTE'S RESTAURANT L.L.C.

**Current Principal Place of Business:**

4595 HYPOLUXO ROAD  
7  
LAKE WORTH, FL 33461

**New Principal Place of Business:**

**Current Mailing Address:**

4595 HYPOLUXO ROAD  
7  
LAKE WORTH, FL 33461

**New Mailing Address:**

FEI Number: 20-4058915      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LOUIDOR, ALBERTE  
4595 HYPOLUXO ROAD  
7  
LAKE WORTH, FL 33461 US

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

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: ALBERTE LOUIDOR

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LOUIDOR, ALBERTE  
Address: 5089 SANCERRE CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463

Title: MGRM  
Name: MARSEILLE, WILGIMPS  
Address: 5089 SANCERRE CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ALBERTE LOUIDOR

MGRM

05/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date