

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 15, 2009
Secretary of State

DOCUMENT# L06000098929

Entity Name: KITTS ENTERPRISES, LLC

Current Principal Place of Business:

16703 EAGLE OAK DRIVE
ODESSA, FL 33556 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 20794
TAMPA, FL 33622 US

New Mailing Address:

FEI Number: 20-5680400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PORAT, RON
6702 N. GUNLOCK AVENUE
TAMPA, FL 33614 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: RON PORAT

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NOH, TAE J
Address: P.O. BOX 20794
City-St-Zip: TAMPA, FL 33622 US

Title: MGRM () Delete
Name: NOH, IRIS Y
Address: P.O. BOX 20794
City-St-Zip: TAMPA, FL 33622 US

Title: MGRM () Delete
Name: NOH, TAE W
Address: 6594 GILLIS DRIVE
City-St-Zip: SAN JOSE, CA 95120 US

Title: MGRM () Delete
Name: NOH, SUNG M
Address: 6594 GILLIS DRIVE
City-St-Zip: SAN JOSE, CA 95120 US

Title: MGRM () Delete
Name: NOH, KYUNG M
Address: 680 SPRING HILL LANE
City-St-Zip: CINCINNATI, OH 45228 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: TAE NOH

MGRM

10/15/2009

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