

# 2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000098929

FILED  
Aug 28, 2012  
Secretary of State

**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 ( )**

**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  
Name: NOH, TAE J  
Address: P.O. BOX 20794  
City-St-Zip: TAMPA, FL 33622 US

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

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

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

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

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: TAE J NOH

MGRM

08/28/2012

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