


2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
 09 OCT 30 PM 4:56
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # L07000046021					
1. Entity Name A&W RETAIL AND CONSULTATION LLC					
Principal Place of Business 1795 SOUTHWEST 84TH TERRACE MIRAMAR, FL 33025			Mailing Address 1795 SOUTHWEST 84TH TERRACE MIRAMAR, FL 33025		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc		Suite, Apt. #, etc			
City & State		City & State		4. FEI Number 22-3963515	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
Wendy Alleyne-Woods 1795 SW 84 Terrace Miramar FL 33025			Name Wendy Alleyne-Woods		
			Street Address (P.O. Box Number is Not Acceptable)		
			1795 SW 84 Terrace		
			City Miramar		FL
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 <i>W Woods</i>		DATE 10/28/09		(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$138.75 After January 1, 2010, Fee will be \$277.50		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ALLEYNE-WOODS, WENDY		NAME	200161430812	
STREET ADDRESS	1795 SOUTHWEST 84TH TERRACE		STREET ADDRESS	10/07/09--01015--001 ***138.75	
CITY-ST-ZIP	MIRAMAR, FL 33025		CITY-ST-ZIP		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	WOODS, TERRANCE		NAME		
STREET ADDRESS	1795 SOUTHWEST 84TH TERRACE		STREET ADDRESS		
CITY-ST-ZIP	MIRAMAR, FL 33025		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 608, Florida Statutes.					
SIGNATURE: <i>W Woods</i>		DATE: 9/29/09		DAYTIME PHONE #: 954-639-2213	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

REINSTATEMENT

2009-09

S. HAWKES

NOV - 2 2009

EXAMINER

S. HAWKES

OCT 15 2009

EXAMINER

(Handwritten signature)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2009

A&W RETAIL AND CONSULTATION LLC
1795 SOUTHWEST 84TH TERRACE
MIRAMAR, FL 33025

SUBJECT: A&W RETAIL AND CONSULTATION LLC
Ref. Number: L07000046021

We have received your document for A&W RETAIL AND CONSULTATION LLC and your check(s) totaling \$138.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 009A00033034