

# 2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000119356

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

**Entity Name:** DISCOUNT VILLAGE SPIRITES LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

16535 N. HWY 301  
BLDG C  
CITRA, FL 32113

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 215  
ORANGE LAKE, FL 32681

**New Mailing Address:**

**FEI Number:** 33-1192282      **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:**

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

MCMANAMY, ADA R MGR/MEM  
5561 NW191ST PLACE  
ORANGE LAKE, FL 32681      US

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: ADA MCMANAMY

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** MCMANAMY, ADA R, MGRM  
**Address:** 16535 N. HWY 301, BLDG C  
**City-St-Zip:** CITRA, FL 32113

**Title:** MGR  
**Name:** RUSSELL, FRANK V MGR  
**Address:** 5561 NW 191ST PL.  
**City-St-Zip:** ORANGE LAKE, FL 32681

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: ADA MCMANAMY

MS

03/18/2010

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