

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000018431

FILED
Nov 05, 2009
Secretary of State

Entity Name: FRANBIZ ICE, LLC

Current Principal Place of Business:

2502 NORTH ROCKY POINT DRIVE
SUITE 660
TAMPA, FL 33607 US

New Principal Place of Business:

1901 ULMERTON ROAD
SUITE 400
CLEARWATER, FL 33762 US

Current Mailing Address:

2502 NORTH ROCKY POINT DRIVE
SUITE 660
TAMPA, FL 33607 US

New Mailing Address:

1901 ULMERTON ROAD
SUITE 400
CLEARWATER, FL 33762 US

FEI Number: 26-1999744 **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:

COHRS, DENIS A
2575 ULMERTON ROAD
SUITE 210
CLEARWATER, FL 33762 US

Name and Address of New Registered Agent:

COHRS, DENIS A
1901 ULMERTON ROAD
SUITE 425
CLEARWATER, FL 33762 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: DENIS A. COHRS

11/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FRANBIZ, INC.
Address: 2502 NORTH ROCKY POINT DRIVE, SUITE 660
City-St-Zip: TAMPA, FL 33607 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KENNETH A. GORDON
Address: 1901 ULMERTON ROAD
City-St-Zip: CLEARWATER, FL 33762 US

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: KENNETH A. GORDON

MGR

11/05/2009

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