

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED  
Oct 22, 2009  
Secretary of State

DOCUMENT# L08000092266

Entity Name: DIET DINNERWARE LLC

**Current Principal Place of Business:**

6496 NW 31ST WAY  
BOCA RATON, FL 33496 US

**New Principal Place of Business:**

**Current Mailing Address:**

6496 NW 31ST WAY  
BOCA RATON, FL 33496 US

**New Mailing Address:**

FEI Number: 26-3458700      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:**

ORLINSKY, SEYMOUR  
6496 N.W. 31ST WAY  
BOCA RATON, FL 33496 US

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

ORLINSKY, SEYMOUR  
6496 NW 31ST WAY  
BOCA RATON, FL 33496 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: SEYMOUR ORLINSKY

10/22/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ORLINSKY, SEYMOUR  
Address: 6496 N.W. 31ST WAY  
City-St-Zip: BOCA RATON, FL 33496 US

Title: MGRM ( ) Delete  
Name: ORLINSKY, ELLEN  
Address: 6496 N.W. 31ST WAY  
City-St-Zip: BOCA RATON, FL 33496 US

Title: MGRM ( ) Delete  
Name: SPIEGEL, DAVID  
Address: 6496 N.W. 31ST WAY  
City-St-Zip: BOCA RATON, FL 33496 US

Title: MGRM ( ) Delete  
Name: SPIEGEL, SYLVIA  
Address: 6496 N.W. 31ST WAY  
City-St-Zip: BOCA RATON, FL 33496 US

**ADDITIONS/CHANGES:**

Title: P (X) Change ( ) Addition  
Name: ORLINSKY, SEYMOUR  
Address: 6496 NW 31ST WAY  
City-St-Zip: BOCA RATON, FL 33496 US

Title: S (X) Change ( ) Addition  
Name: ORLINSKY, ELLEN  
Address: 6496 NW 31ST WAY  
City-St-Zip: BOCA RATON, FL 33496 US

Title: T (X) Change ( ) Addition  
Name: SPIEGEL, DAVID  
Address: 80 MOHAWK TRAIL  
City-St-Zip: STAMFORD, CT 06903 US

Title: S (X) Change ( ) Addition  
Name: SPIEGEL, SYLVIA  
Address: 80 MOHAWK TRAIL  
City-St-Zip: STAMFORD, CT 06903 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: SEYMOUR ORLINSKY

PRES

10/22/2009

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