

# 2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000132388

**FILED**  
**Feb 20, 2013**  
**Secretary of State**

**Entity Name:** CELIKLER LLC

**Current Principal Place of Business:**

3125 WEST NAPOLEON AVENUE  
TAMPA, FL 33611 US

**New Principal Place of Business:**

**Current Mailing Address:**

3125 WEST NAPOLEON AVENUE  
TAMPA, FL 33611 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

KAVURT LAW OFFICES PA  
636 WEST YALE STREET  
ORLANDO, FL 32804 US

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

GABRIELA RIZA PA  
5641 HOOVER BLVD  
SUITE A5  
TAMPA, FL 33634 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: GABRIELA RIZA

02/20/2013

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CELIK, CETIN  
Address: 3125 WEST NAPOLEON AVENUE  
City-St-Zip: TAMPA, FL 33611 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: CELIK CETIN

MGRM

02/20/2013

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