

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000078189

**FILED**  
**Oct 06, 2010**  
**Secretary of State**

**Entity Name:** RESTAURANT DELIVERY DEVELOPERS, LLC

**Current Principal Place of Business:**

214 W. UNIVERSITY AVENUE  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

214 W. UNIVERSITY AVENUE  
GAINESVILLE, FL 32601

**New Mailing Address:**

**FEI Number:** 27-0729766

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KARNIEWICZ, JUDY  
1406 W. FLETCHER AVENUE  
TAMPA, FL 33612 US

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

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:** JUDY KARNIEWICZ

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** COLANGELO, THOMAS  
**Address:** 4836 NW 19TH STREET  
**City-St-Zip:** COCONUT CREEK, FL 33063

**Title:** MGRM  
**Name:** SINOR, DANIEL O  
**Address:** 1325 STONE ROAD, #401  
**City-St-Zip:** TALLAHASSEE, FL 32303

**Title:** MGRM  
**Name:** MOORE, WILLIAM C  
**Address:** 3602 UPPER UNION ROAD  
**City-St-Zip:** ORLANDO, FL 32814

**Title:** MGRM  
**Name:** BROWN, ANDREW N  
**Address:** 2516 EAST CHURCH STREET  
**City-St-Zip:** ORLANDO, FL 32803

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:** DANIEL SINOR

MGRM

10/06/2010

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