| Name and Address of Current Registered Agent: | | | | |
|--|--|-----------------|-----------------------------|-----------|
| NAOULI, HASS 6145 MERRILL JACKSONVILLI | | | | |
| 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 | E: HASSAN NAOULI | | 1 | 2/21/2018 |
| | Electronic Signature of Registered Agent | | | Date |
| Authorized Person(s) Detail : | | | | |
| Title | MGRM | Title | MGRM | |
| Name | BADRE, REDOUANE | Name | NAOULI, HASSAN | |
| Address | 7400 POWERS AVENUE APT 318 | Address | 9714 BAYTREE TOWNE CIRCLE I | Ē |
| City-State-Zip: | JACKSONVILLE FL 32217 | City-State-Zip: | JACKSONVILLE FL 32256 | |
| Title | MGRM | | | |
| Name | LABIAD, YOUSSEF | | | |
| Address | 7400 POWERS AVENUE APT 318 | | | |

DOCUMENT# L10000055142 Entity Name: LOUISIANA FISH AND CHICKEN LLC

2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

Current Principal Place of Business:

6145 MERRILL ROAD JACKSONVILLE, FL 32277

Current Mailing Address:

6145 MERRILL ROAD JACKSONVILLE. FL 32277

FEI Number: NOT APPLICABLE

Na

JACKSONVILLE FL 32217

City-State-Zip:

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: YOUSSEF LABIAD

MG

Electronic Signature of Signing Authorized Person(s) Detail

FILED Dec 21, 2018 Secretary of State CR8187557781

Certificate of Status Desired: Yes

Date