2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G46473

City-St-Zip:

DEERFIELD BEACH, FL 33442

FILED Oct 29, 2008 Secretary of State

Entity Nai	me: L. & L. S	PECIALT	Y FOODS, INC.			
Current Principal Place of Business:			iness:	New Principal Place of Business:		
	SBY BLVD. DBEACH, FL	33442	US			
Current M	lailing Addre	ss:		New Mailing Addre	9SS:	
	SBY BLVD. BEACH, FL	33442	US			
FEI Number	: 59-2307257	FEI Nu	mber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address	Name and Address of New Registered Agent:	
MAYERSOHN, JOEL 350 EAST LOS OLAS BLVD SUITE 1700 FORT LAUDERDALE, FL 33301 US				100 W. CYPRESS (SUITE 700	GREENSPOON MARDER, P.A. 100 W. CYPRESS CREEK ROAD SUITE 700 FORT LAUDERDALE, FL 33309 US	
	named entity e of Florida.	submits	this statement for the p	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATU	RE: GREGO	RY BLOE	DIG		10/29/2008	
	Electro	nic Signa	ture of Registered Age	ent	Date	
			S., the corporation did no and Contribution ().	t receive the prior notice.		
OFFICERS	S AND DIREC	TORS:		ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (KLINE, DAVID 350 GOOLSB\ DEERFIELD B	Y BLVD	33442	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (CAINE, STEVE 350 GOOLSBY DEERFIELD B	Y BLVD.	33442	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VSD (FREEMAN, DA			Title: Name: Address:	() Change () Addition	

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DAVID KLINE P 10/29/2008	
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