

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000000124

FILED  
Aug 02, 2005  
Secretary of State

Entity Name: GARLIC DISTRIBUTION, LLC

## Current Principal Place of Business:

8830 CREEK RUN DRIVE  
BONITA SPRINGS, FL 34135

## New Principal Place of Business:

29038 ALESSANDRIA CIRCLE  
BONITA SPRINGS, FL 34135

## Current Mailing Address:

8830 CREEK RUN DRIVE  
BONITA SPRINGS, FL 34135

## New Mailing Address:

29038 ALESSANDRIA CIRCLE  
BONITA SPRINGS, FL 34135

FEI Number: 59-3617448      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:

WILLIAM SCOTT MCCALLISTER  
8830 CREEK RUN DRIVE  
BONITA SPRINGS, FL 34135      US

## Name and Address of New Registered Agent:

WILLIAM SCOTT MCCALLISTER  
29038 ALESSANDRIA CIRCLE  
BONITA SPRINGS, FL 34135      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: WILLIAM SCOTT MCCALLISTER

08/02/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR      ( ) Delete  
Name: MCCALLISTER, WILLIAM S  
Address: 8830 CREEK RUN DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGR      ( ) Delete  
Name: MCCALLISTER, CARON A  
Address: 8830 CREEK RUN DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34135

## ADDITIONS/CHANGES:

Title: MGR      (X) Change ( ) Addition  
Name: MCCALLISTER, WILLIAM S  
Address: 29038 ALESSANDRIA CIRCLE  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGR      (X) Change ( ) Addition  
Name: MCCALLISTER, CARON A  
Address: 29038 ALESSANDRIA CIRCLE  
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM S MCCALLISTER

MGR

08/02/2005

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