

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L00000015191

**FILED**  
**Dec 02, 2006**  
**Secretary of State**

**Entity Name:** CONTINENTAL CATERING, L.L.C.

**Current Principal Place of Business:**

P.O. BOX 212047  
WEST PALM BEACH, FL 33421

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 212047  
WEST PALM BEACH, FL 334212047

**New Mailing Address:**

**FEI Number:** 65-1059548

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ( )

**Certificate of Status Desired** (X)

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

SCIRROTTO, GREGORY A  
18319 OAK LEAF DR.  
JUPITER, FL 33458 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:** GREGORY A. SCIRROTTO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** SCIRROTTO, GREGORY A  
**Address:** 18319 OAK LEAF DR.  
**City-St-Zip:** JUPITER, FL 33458

**ADDITIONS/CHANGES:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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:** GREGORY A. SCIRROTTO

MGRM

12/02/2006

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