2004 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 02, 2004
Secretary of State

DOCUMENT# L01000005383

Entity Name: CENTRAL FLORIDA TAE KWON DO CENTER, LLC.

Current Principal Place of Business:

12445 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

12445 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 59-3709289 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEST, CHAD A
12445 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837 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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: WEST, CHAD A
Address: 12445 S. ORANGE BLSSOM TRAIL
City-St-Zip: ORLANDO, FL

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 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: CHAD A. WEST MNGR 11/02/2004

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