## 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L01000007627

Entity Name: BAG BEYOND, L.L.C.

City-St-Zip:

FILED Dec 12, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8144 W 26 AVE HIALEAH, FL 33016 **Current Mailing Address: New Mailing Address:** 8144 W 26 AVE HIALEAH, FL 33016 FEI Number: 65-1111055 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: Name and Address of New Registered Agent: SWISSA, AENRI 8144 WÉST 26 AVE HIALEAH, FL 33016 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: AENRI SWISSA Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete SWISSA, AENRI Name: Name: Address: 8144 WEST 26 AVE Address: City-St-Zip: HIALEAH, FL 33016 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: SWISSA, PATRICIA M Name: Address: 8144 WEST 26 AVE Address: City-St-Zip: HIALEAH, FL 33016 City-St-Zip: Title: () Delete Title: PTR ( ) Change (X) Addition Name: SWISSA, AENRI Name: 8144 WEST 26 AVENUE Address: Address:

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 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.

City-St-Zip:

HIALEAH, FL 33016

SIGNATURE: AENRI SWISSA PTR 12/12/2007