

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT



**DOCUMENT # L02000024891**

1. Entity Name  
**THAI LAINA, L.L.C.**

Principal Place of Business  
**6518 GATEWAY AVE.  
SARASOTA, FL 34231**

Mailing Address  
**8413 COUNTRY PARKWAY  
SARASOTA, FL 34243-2944**

**FILED**

2007 APR 17 AM 10:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



03222007 REIN-LLC CR2E101 (1/07)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**03-0482413**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**REINICKE, STEPHANIE A  
1800 SECOND STREET STE. 803  
SARASOTA, FL 34236**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$100.00**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM  Delete  
NAME SYSOUVANH, BOUNHEUAN  
STREET ADDRESS 4440 MCINTOSH LAKE AVE.  
CITY-ST-ZIP SARASOTA, FL 34238

Change  Addition  
**700101796987**  
**05/08/07--01017--004 \*\*100.00**

TITLE MGR  Delete  
NAME SYSOUVANH, BOUNNY  
STREET ADDRESS 4440 MCINTOSH LAKE AVE.  
CITY-ST-ZIP SARASOTA, FL 34238

Change  Addition

TITLE MGRM  Delete  
NAME TIAMTISACK, SOMNHUTH  
STREET ADDRESS 8413 COUNTRY PARKWAY  
CITY-ST-ZIP SARASOTA, FL 34243

Change  Addition

TITLE MGR  Delete  
NAME TIAMTISACK, SENCNCUM  
STREET ADDRESS 8413 COUNTRY PARKWAY  
CITY-ST-ZIP SARASOTA, FL 34243

Change  Addition

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition  
**REINSTATEMENT 06-07**

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *S. Reinicke*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-11-07

Date

941-228-2005

Daytime Phone #