

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000008092

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** COASTAL RESTAURANT GROUP, L.L.C.

**Current Principal Place of Business:**

108 ANASTASIA BLVD  
ST. AUGUSTINE, FL 32080

**New Principal Place of Business:**

45 CUBBEDGE RD  
ST. AUGUSTINE, FL 32080

**Current Mailing Address:**

108 ANASTASIA BLVD  
ST. AUGUSTINE, FL 32080

**New Mailing Address:**

45 CUBBEDGE RD  
ST. AUGUSTINE, FL 32080

**FEI Number:** 54-2100091

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCLEMORE, THEODORE  
108 ANASTASIA BLVD  
ST. AUGUSTINE, FL 32080 US

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

MCLEMORE, THEODORE  
45 CUBBEDGE RD  
ST. AUGUSTINE, FL 32080 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: THEODORE MCLEMORE

05/01/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: MCLEMORE, THEODORE  
Address: 45 CUBBEDGE RD  
City-St-Zip: ST. AUGUSTINE, FL 32080

I hereby 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: THEODORE MCLEMORE

PRES

05/01/2012

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