

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000027212

Entity Name: BAGGAGE CLAIM, LLC

FILED
Apr 18, 2011
Secretary of State

Current Principal Place of Business:

20 ELOISE CIRCLE
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

20 ELOISE CIRCLE
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 04-3767709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TONY, MARIANETTI
20 ELOISE CIRCLE
ORMOND BEACH, FL 32176 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: JOSEPH LOGUIDICE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MRGM
Name: TONY, MARIANETTI
Address: 20 ELOISE CIRCLE
City-St-Zip: ORMOND BEACH, FL 32176

Title: MRGM
Name: PATRICIA, MARIANETTI
Address: 20 ELOISE CIRCLE
City-St-Zip: ORMOND BEACH, FL 32176

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: TONY MARIANETTI

P

04/18/2011

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