

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000052507

Entity Name: LIVE BAIT LOUNGE, LLC

FILED
Sep 18, 2007
Secretary of State

Current Principal Place of Business:

405 WILLIAM STREET
KEY WEST, FL 33040

New Principal Place of Business:

241 MARGARET STREET
KEY WEST, FL 33040

Current Mailing Address:

405 WILLIAM STREET
KEY WEST, FL 33040

New Mailing Address:

241 MARGARET STREET
KEY WEST, FL 33040

FEI Number: 20-0660219 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:

KELLEY, SEAN W
802 EATON STREET
SUITE 1
KEY WEST, FL 33040 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: SEAN KELLEY

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ANDREWS, BARRY
Address: 510 NOAH LANE
City-St-Zip: KEY WEST, FL 33040

Title: MGRM () Delete
Name: EVA, ANDREWS M
Address: 510 NOAH LANE
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ANDREWS, BARRY
Address: 604 ELIZABETH STREET
City-St-Zip: KEY WEST, FL 33040

Title: MGRM (X) Change () Addition
Name: EVA, ANDREWS M
Address: 604 ELIZABETH STREET
City-St-Zip: KEY WEST, FL 33040

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.

SIGNATURE: BARRY ANDREWS

MM

09/18/2007

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