## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L03000055264

Entity Name: ORLANDO BALAJI, LLC

4101 HWY 441 SOUTH

OKEECHOBEE, FL 34974

Address:

City-St-Zip:

FILED Jul 01, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 950 SOUTH FEDERAL HIGHWAY 1565 N BROADWAY AVE STUART, FL 34994 BARTOW, FL 33830 **Current Mailing Address: New Mailing Address:** 950 SOUTH FEDERAL HIGHWAY 1565 N BROADWAY AVE STUART, FL 34994 BARTOW, FL 33830 FEI Number: 33-1082600 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: ODIRAKALLUMKAL, MANI ODIRAKALLUMKAL, JIM 950 SOUTH FEDERAL HIGHWAY 701 SW SAN ANTONIO DRIVE PALM CITY, FL 34990 STUART, FL 34994 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: JIM ODIRAKALLUMKAL 07/01/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete ODIRAKALLUMKAL, MANI Name: Name: Address: 950 SOUTH FEDERAL HIGHWAY Address: City-St-Zip: STUART, FL 34994 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: ODIRAKALLUMKAL, JIM Name: Address: 701 SW SAN ANTONIO DRIVE Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition CHAUHAN, KIRAN Name: CHAUHAN, KIRAN Name: 6205 HAMPTON POINTE CIRCLE 4101 HWY 441 SOUTH Address: Address: City-St-Zip: OKEECHOBEE, FL 34974 City-St-Zip: LAKELAND, FL 33813 Title: MGRM ( ) Delete Title: () Change () Addition Name: CHAUHAN, U.K. Name:

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.

Address:

City-St-Zip:

SIGNATURE: JIM ODIRAKALLUMKAL MGRM 07/01/2008