

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000022424

**FILED**  
**Dec 08, 2005**  
**Secretary of State**

**Entity Name:** ZABELLA RESTAURANTS, LLC.

**Current Principal Place of Business:**

4494 N JOHN YOUNG PARKWAY  
ORLANDO, FL 32804

**New Principal Place of Business:**

1234 N. ORANGE AVENUE  
WINTER PARK, FL 32789

**Current Mailing Address:**

4494 N JOHN YOUNG PARKWAY  
ORLANDO, FL 32804

**New Mailing Address:**

1234 N. ORANGE AVENUE  
WINTER PARK, FL 32789

**FEI Number:** 20-0930189      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

SALTSMAN, ROBERT P  
222 S PENNSYLVANIA AVE  
SUITE 200  
WINTER PARK, FL 32789 US

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

HOLENDER, TODD  
1234 N. ORANGE AVENUE  
WINTER PARK, FL 32789 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: TODD HOLENDER

12/08/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: PRES ( ) Change (X) Addition  
Name: HOLENDER, TODD  
Address: 1234 N. ORANGE AVENUE  
City-St-Zip: WINTER PARK, FL 32789

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TODD HOLENDER

PRES

12/08/2005

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