

# 2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000023159

FILED  
Oct 04, 2010  
Secretary of State

Entity Name: BILLY BOYS' HOLDINGS, LLC

**Current Principal Place of Business:**

S4065 OLD 33  
BARABOO, WI 53913

**New Principal Place of Business:**

**Current Mailing Address:**

S4065 OLD 33  
BARABOO, WI 53913

**New Mailing Address:**

FEI Number: 04-3787887

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RICE, THOMAS S  
2913 CONDELL DRIVE  
ORLANDO, FL 32812 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: THOMAS S. RICE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WELLS, LEONARD C  
Address: S4561 VALLEY CIRCLE  
City-St-Zip: NORTH FREEDOM, WI 53951 US

Title: MGRM  
Name: WELLS, JAMES  
Address: 223 BETHEL ROAD  
City-St-Zip: CASEYVILLE, IL 62232 US

Title: MGRM  
Name: WELLS, WILLIAM  
Address: POST OFFICE BOX 424  
City-St-Zip: BARABOO, WI 53913 US

Title: MGRM  
Name: WELLS, JOHN H  
Address: POST OFFICE BOX 424  
City-St-Zip: BARABOO, WI 53913 US

Title: MGRM  
Name: WELLS, LOUIS J  
Address: POST OFFICE BOX 424  
City-St-Zip: BARABOO, WI 53913 US

Title: MGRM  
Name: WELLS, ROBERT B  
Address: S5480 HIGHWAY 136  
City-St-Zip: BARABOO, WI 53951 US

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: JAMES WELLS

MGR

10/04/2010

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