

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000036703

Entity Name: PITA GOURMET LLC

**FILED**  
**Oct 28, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

801 N. CONGRESS AVE ROOM 673  
BOYNTON BEACH, FL 33426

**New Principal Place of Business:**

**Current Mailing Address:**

1605 BOARDMAN AVE  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

FEI Number: 20-1167776

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAPHAEL, DOREID  
1605 BOARDMAN AVE  
WEST PALM BEACH, FL 33407 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: DOREID RAPHAEL

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRSD ( ) Delete  
Name: RAPHAEL, DOREID  
Address: 1605 BOARDMAN AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: MGR ( ) Delete  
Name: AHMED G. AHMED, MANA, GING PARTNER  
Address: 801 N. CONGRESS AVE #673  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGR (X) Delete  
Name: RAPHAEL, RUBY  
Address: 1605 BOARDMAN AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33407

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: AHMED, AHMED G  
Address: 801 N. CONGRESS AVE #673  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DOREID RAPHAEL

PRSD

10/28/2008

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