2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 05, 2006
Secretary of State

DOCUMENT# L04000050109

Entity Name: 2509 1ST STREET, LLC

Current Principal Place of Business:

2036 - 20TH AVENUE PARKWAY
INDIAN ROCKS BEACH, FL 33785

New Principal Place of Business:

420 20TH AVE.
INDIAN ROCKS BEACH, FL 33785

Current Mailing Address:

2036 - 20TH AVENUE PARKWAY
INDIAN ROCKS BEACH, FL 33785

New Mailing Address:

420 20TH AVE.
INDIAN ROCKS BEACH, FL 33785

FEI Number: 20-1335553 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, PETER A
2036 20TH AVENUE PARKWAY
INDIAN ROCKS BEACH, FL 33785 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: PETER SMITH

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SMITH, PETER A
Address: 2036 - 20TH AVENUE PARKWAY
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: MGRM ( ) Delete
Name: SMITH, PARASQUEVI
Address: 2036 - 20TH AVENUE PARKWAY
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: MGRM ( ) Delete
Name: HAROCOPOS, EVELYN
Address: 2036 - 20TH AVENUE PARKWAY
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: MGRM ( ) Delete
Name: HAROCOPOS, MARIA
Address: 2036 - 20TH AVENUE PARKWAY
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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

ADDITIONS/CHANGES:

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

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

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

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

Title: MGRM ( ) Change (X) Addition
Name: HAROCOPOS, LAMPROS
Address: 402 20TH AVE
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER SMITH MGRM 10/05/2006

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