

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000053581

FILED
Jan 08, 2006
Secretary of State

Entity Name: P&L HOLDINGS & INVESTMENTS LLC

Current Principal Place of Business:

933 LEE ROAD
SUITE 400
ORLANDO, FL 32810

New Principal Place of Business:

GARDEN DELI 2600 CENTRE PKWY
SUITE 140
MAITLAND, FL 32751 US

Current Mailing Address:

933 LEE ROAD
SUITE 400
ORLANDO, FL 32810

New Mailing Address:

GARDEN DELI 2600 CENTRE PKWY
SUITE 140
MAITLAND, FL 32751 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

CHAPMAN, LIZ
933 LEE ROAD
SUITE 400
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

CHAPMAN, LIZ
GARDEN DELI 2600 CENTRE PKWY
SUITE 140
MAITLAND, FL 32751 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: LIZ CHAPMAN

01/08/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CHAPMAN, LIZ
Address: 933 LEE ROAD SUITE 400
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CHAPMAN, LIZ
Address: GARDEN DELI 2600 CENTRE PKWY
City-St-Zip: MAITLAND, FL 32751 US

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: LIZ CHAPMAN

MRS

01/08/2006

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