

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000065383

FILED
Jan 18, 2007
Secretary of State

Entity Name: BROOKLYN LUNCHEONETTE, LLC

Current Principal Place of Business:

28130 DOVEWOOD COURT APT. 102
BONITA SPRINGS, FL 34135

New Principal Place of Business:

18621 N. TAMiami TRAIL
NORTH FORT MYERS, FL 33903

Current Mailing Address:

28130 DOVEWOOD COURT APT. 102
BONITA SPRINGS, FL 34135

New Mailing Address:

5203 LAS PALMAS NORTE
NORTH FORT MYERS, FL 33903

FEI Number: 20-1654803 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

KRAUS, PATRICIA
28130 DOVEWOOD COURT APT. 102
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

KRAUS, PATRICIA
5203 LAS PALMAS NORTE
NORTH FORT MYERS, FL 33903 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: PATRICIA KRAUS

01/18/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KRAUS, PATRICIA
Address: 28130 DOVEWOOD COURT APT. 102
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KRAUS, PATRICIA
Address: 5203 LAS PALMAS NORTE
City-St-Zip: NORTH FORT MYERS, FL 33903

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: PATRICIA KRAUS

MGRM

01/18/2007

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