

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000021964

Entity Name: M.J. FOODS, L.L.C.

FILED
Feb 12, 2008
Secretary of State

Current Principal Place of Business:

2412 W SAND LAKE ROAD
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 59382
ORLANDO, FL 32859

New Mailing Address:

P.O. BOX 593447
ORLANDO, FL 32859

FEI Number: 04-3827952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

SWANN, K. MICHAEL
258 SOUTHHALL LANE, SUITE 420
MAITLAND, FL 32751 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: K. MICHAEL SWANN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCLEAN, COLIN
Address: 2412 W. SANDLAKE ROAD
City-St-Zip: ORLANDO, FL 32809

Title: MGR () Delete
Name: ALTIFF, JASON
Address: 2412 W. SANDLAKE ROAD
City-St-Zip: ORLANDO, FL 32809

Title: MGR () Delete
Name: SPRINGER, CHARLES
Address: 2412 W. SANDLAKE ROAD
City-St-Zip: ORLANDO, FL 32809

Title: MGR () Delete
Name: SCHIFFMAN, MICHAEL
Address: 2412 W. SANDLAKE ROAD
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MCLEAN, COLIN
Address: P.O. BOX 593447
City-St-Zip: ORLANDO, FL 32859

Title: MGR (X) Change () Addition
Name: ALTIFF, JASON
Address: P.O. BOX 593447
City-St-Zip: ORLANDO, FL 32859

Title: MGR (X) Change () Addition
Name: SPRINGER, CHARLES
Address: P.O. BOX 593447
City-St-Zip: ORLANDO, FL 32859

Title: MGR (X) Change () Addition
Name: SCHIFFMAN, MICHAEL
Address: P.O. BOX 593447
City-St-Zip: ORLANDO, FL 32859

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: COLIN MCCLEAN

MGR

02/12/2008

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