2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000046649

Name:

Address:

City-St-Zip:

Entity Name: BELLE AVENUE WAREHOUSES, LLC

FILED Jul 14, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1255 BELLE AVENUE, #101 1151 AUDUBON WAY WINTER PSRINGS, FL 32708 MAITLAND, FL 32151 **Current Mailing Address: New Mailing Address:** 1255 BELLE AVENUE, #101 1151 AUDUBON WAY WINTER PSRINGS, FL 32708 MAITLAND, FL 32751 FEI Number: 20-2814935 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: Name and Address of New Registered Agent: SHAMS, MAURICE ALPERT, JAY 1151 AUDUBON WAY 111 N. ORANGE AVE., STE. 1200 ORLANDO, FL 32801 US MAITLAND, FL 32751 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: JAY ALPERT 07/14/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete Title: MGRM () Change (X) Addition ALPERT, JAY Name: Name: Address: Address: 1151 AUDUBON WAY City-St-Zip: City-St-Zip: MAITLAND, FL 32751 Title: Title: MGRM () Change (X) Addition () Delete

Name:

Address:

City-St-Zip:

ALPERT, CATHERINE

1151 AUDUBON WAY

MAITLAND, FL 32751

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: JAY ALPERT MGRM 07/14/2007