2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000075032

Entity Name: BLACK BIRD ENTERPRISES, LLC

3614 W. EUCLID AVENUE

TAMPA, FL 33629

Address:

City-St-Zip:

FILED Mar 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3614 W. EUCLID AVENUE TAMPA, FL 33629 **Current Mailing Address: New Mailing Address:** 3614 W. EUCLID AVENUE TAMPA, FL 33629 FFI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent: JACOBSON, REBECCA S 3614 W. EUCLID AVENUE TAMPA, FL 33629 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: REBECCA S JACOBSON Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete JACOBSON, REBECCA S Name: Name: Address: 3614 W. EUCLID AVENUE Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition THOMPSON, BRYAN C Name: Name: Address: 3614 W. EUCLID AVENUE Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition JACOBSON, STEPHEN B Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: REBECCA S JACOBSON MGRM 03/01/2007