

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000077549

**FILED**  
**Apr 01, 2009**  
**Secretary of State**

**Entity Name:** BOWLING SERVICES LLC

**Current Principal Place of Business:**

4728 MEDOWVIEW CIRCLE  
SARASOTA, FL 34233

**New Principal Place of Business:**

**Current Mailing Address:**

4728 MEDOWVIEW CIRCLE  
SARASOTA, FL 34233

**New Mailing Address:**

**FEI Number:** 20-4571714      **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:**

RAMOS, ANA L  
935 N BENEVA RD  
SUITE 609-6  
SARASOTA, FL 34232 US

**Name and Address of New Registered Agent:**

RAMOS, ANA L  
766 S OSPREY AVE  
SUITE 8  
SARASOTA, FL 34236 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: ANA L RAMOS

04/01/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: INSIGNARES, SAUL A SR.  
Address: 4728 MEDOW VIEW CIRCLE  
City-St-Zip: SARASOTA, FL 34233

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SAUL A INSIGNARES SR

MGR

04/01/2009

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