2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Feb 14, 2007
Secretary of State

DOCUMENT# L05000085926

Entity Name: BAY SMOKES, LLC

Current Principal Place of Business:

4157 TAMIAMI TRAIL SOUTH
VENICE VILLAGE SHOPPES
VENCE, FL 34293

New Principal Place of Business:

Current Mailing Address:

4157 TAMIAMI TRAIL SOUTH
VENICE VILLAGE SHOPPES
VENCE, FL 34293

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STURGES, ERNEST W JR.
18501 MURDOCK CIRCLE
SUITE 501
PORT CHARLOTTE, FL 33948 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: ERNEST W. STURGES, JR.

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ALI, MOHAMMED A
Address: 4157 TAMIAMI TRAIL S.
City-St-Zip: VENICE, FL 34293

Title: MGRM ( ) Delete
Name: SNIDER, THOMAS J
Address: 4157 TAMIAMI TRAIL S.
City-St-Zip: VENICE, FL 34293

Title: MGRM ( ) Delete
Name: BUENO, DONABEL
Address: 4157 TAMIAMI TRAIL S.
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES:

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

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

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

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: MOHAMMED A. ALI MGRM 02/14/2007

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