2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000086449

Entity Name: MONSOON CAFE LLC

FILED Oct 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

829 FLEMING ST.

KEY WEST, FL 33040 US

Current Mailing Address: New Mailing Address:

3075 FLAGLER AVE. 829 FLEMING ST.

09 KEY WEST, FL 33040 US

KEY WEST, FL 33040 US

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

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

DOHERTY, TIMOTHY L
3075 FLAGLER AVE.

DOHERTY, TIMOTHY L
829 FLEMING ST.

09 KEY WEST, FL 33040 US KEY WEST, FL 33040 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: TIMOTHY L.S. DOHERTY 10/18/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 MAINZER, CRAIG
 Name:
 DOHERTY, TIMOTHY L

 Address:
 624 WHITE ST.
 Address:
 829 FLEMING ST.

 City-St-Zip:
 KEY WEST, FL 33040 US
 City-St-Zip:
 KEY WEST, FL 33040 US

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 MAINZER, CRAIG

 Address:
 Address:
 829 FLEMING ST.

 City-St-Zip:
 City-St-Zip:
 KEY WEST, FL 33040 US

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: TIMOTHY LS DOHERTY MGRM 10/18/2006