

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000105247

FILED
Oct 09, 2006
Secretary of State

Entity Name: TIO PEPE'S LATIN GRILL, L.L.C.

Current Principal Place of Business:

800 ZEAGLER DRIVE #210
PALATKA, FL 32177

New Principal Place of Business:

2502 REID STREET
PALATKA, FL 32177

Current Mailing Address:

800 ZEAGLER DRIVE #210
PALATKA, FL 32177

New Mailing Address:

PO BOX 520
PALATKA, FL 32178

FEI Number: 20-3827121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DE LA TORRE, ROBERT
149 WEERTS ROAD
SAN MATEO, FL 32187 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: ROBERT DE LA TORRE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DEJUK, MIGUEL G
Address: 800 ZEAGLER DRIVE, #210
City-St-Zip: PALATKA, FL 32177

Title: MGRM () Delete
Name: DE LA TORRE, ROBERT
Address: 149 WEERTS ROAD
City-St-Zip: SAN MATEO, FL 32187

Title: MGRM () Delete
Name: DEJUK, DIANE
Address: 800 ZEAGLER DRIVE, #210
City-St-Zip: PALATKA, FL 32177

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: ROBERT DE LA TORRE

MGRM

10/09/2006

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