

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000105247

FILED
Oct 12, 2007
Secretary of State

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

Current Principal Place of Business:

2502 REID STREET
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

PO BOX 520
PALATKA, FL 32178

New Mailing Address:

FEI Number: 20-3827121 **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:

Name and Address of New Registered Agent:

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

MGR

10/12/2007

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