

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000012196

FILED
Dec 03, 2008
Secretary of State

Entity Name: EMILY'S DELI SHOP USA, LLC

Current Principal Place of Business:

16 WEST FLAGLER STREET
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

16 WEST FLAGLER STREET
MIAMI, FL 33130

New Mailing Address:

FEI Number: 26-1290659 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:

PIMIENTA, EUCLIDES
16 WEST FLAGLER STREET
MIAMI, FL 33130 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: PIMIENTA, EUCLIDES

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PIMIENTA, EUCLIDES
Address: 16 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33130

Title: MGR () Delete
Name: PIMIENTA, MARIA
Address: 16 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33130

Title: MGR () Delete
Name: NARVAEZ, CARLOS A
Address: 16 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33130

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: PIMIENTA, EUCLIDES

MGR

12/03/2008

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