

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000022533

Entity Name: JIMMY JOE, LLC

FILED
Oct 01, 2008
Secretary of State

Current Principal Place of Business:

375 NW BAYONET PLACE
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

375 NW BAYONET PLACE
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

SCUDERI, JOANNE
375 NW BAYONET PLACE
JENSEN BEACH, FL 34957 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: JOANNE SCUDERI

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCUDERI, JAMES
Address: 375 NW BAYONET PLACE
City-St-Zip: JENSEN BEACH, FL 34957

Title: MGRM () Delete
Name: SCUDERI, JOANNE
Address: 375 NW BAYONET PLACE
City-St-Zip: JENSEN BEACH, FL 34957

Title: MGR (X) Delete
Name: FERME, JOSEPH
Address: 118 SCHOOLHOUSE ROAD
City-St-Zip: EAST ISLIP, NY 11730

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: JOANNE SCUDERI

RA

10/01/2008

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