## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L06000024911

2003 ACADEMY BLVD

City-St-Zip: CAPE CORAL, FL 33990

Address:

Entity Name: MCTC BLIMPIE SUBS & SALADS LLC

FILED Oct 28, 2008 Secretary of State

Current Principal Place of Business:		New Principal Pl	New Principal Place of Business:	
11225 TAN NAPLES, I	MIAMI TRAIL N FL 34110			
Current Mailing Address:		New Mailing Add	New Mailing Address:	
	DEMY BLVD RAL, FL 33990			
In accordan	: 76-0818148 FEI Number Applied For ( ce with s. 607.193(2)(b), F.S., the limited liabil	lity company did not receive the prior n	otice.	
Name and	Address of Current Registered Age	nt: Name and Addre	ss of New Registered Agent:	
2003 ACAI CAPE COI	ME, MACKLY MR. DEMY BLVD RAL, FL 33990 US	r the purpose of changing its regis	torod office or registered agent or both	
	named entity submits this statement fo e of Florida.	i the purpose of changing its regis	tered office of registered agent, or both	
SIGNATUR	RE: MACKLY MONESTIME			
	Electronic Signature of Registere	ed Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete MONESTIME, MACKLY MR. 2003 ACADEMY BLVD CAPE CORAL, FL 33990	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete CHAVARRIA, OSCAR 3113 SE 8TH AVE CAPE CORAL, FL 33904	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete THELISMA, MAGDALA MRS. 3113 SE 8TH AVE CAPE CORAL, FL 33904	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM ( ) Delete CHERY, ESTHER MRS.	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MAGDALA THELISMA MGRM 10/28/2008