

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000027136

Entity Name: SPACE GALORE, LLC

FILED  
Oct 10, 2007  
Secretary of State

**Current Principal Place of Business:**

1400 NE 125 STREET  
N MIAMI, FL 33161

**New Principal Place of Business:**

1400 NE 125 STREET  
N MIAMI, FL 33161

**Current Mailing Address:**

4515 N JEFFERSON AVENUE  
MIAMI BEACH, FL 33140

**New Mailing Address:**

1400 NE 125 STREET  
N MIAMI, FL 33161

FEI Number: 20-4504025      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:**

OWENS, JOE H  
4515 N JEFFERSON AVENUE  
MIAMI BEACH, FL 33140    US

**Name and Address of New Registered Agent:**

OWENS, JOE H  
7310 BELLE MEADE ISLAND DR  
MIAMI, FL 33138    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: JOE OWENS

10/10/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: OWENS, JOSEPH H  
Address: 4515 N JEFFERSON AVENUE  
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGR      ( ) Delete  
Name: OWENS, CAROL J  
Address: 4515 N JEFFERSON AVENUE  
City-St-Zip: MIAMI BEACH, FL 33140

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: OWENS, JOSEPH H  
Address: 7310 BELLE MEADE ISLAND DRIVE  
City-St-Zip: MIAMI, FL 33138

Title: MGR      (X) Change ( ) Addition  
Name: OWENS, CAROL J  
Address: 1400 NE 125 STREET  
City-St-Zip: N MIAMI, FL 33161

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: JOE OWENS

MGRM

10/10/2007

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