2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 11, 2007
Secretary of State

DOCUMENT# L06000043501

Entity Name: NISSEL INVESTMENTS, LLC

Current Principal Place of Business:

3520 W AMANDA CT
JACKSONVILLE, FL 32259

New Principal Place of Business:

116 BARTRAM OAKS WALK
#103
JACKSONVILLE, FL 32259

Current Mailing Address:

3520 W AMANDA CT
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 20-4827556 **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:

NISSEL, JULIE A
3520 W AMANDA CT
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

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: JULIE A. NISSEL

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	SHARKEY'S CUTS FOR K, IDS	
Address:	3520 W AMANDA CT	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	MGR	( ) Delete
Name:	NISSEL, JULIE A	
Address:	3520 W AMANDA CT	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	MGR	( ) Delete
Name:	NISSEL, PAUL D	
Address:	3520 W AMANDA CT	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	MGR	( ) Delete
Name:	SUMNER, W. E	
Address:	879 EATON AVEN	
City-St-Zip:	CUYAHOGA FALLS, OH 44221	

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:	
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: JULIE A. NISSEL MGR 10/11/2007

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