

# 2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000047543

**FILED**  
**Feb 05, 2010**  
**Secretary of State**

**Entity Name:** GOODFELLAS GAMES LLC

**Current Principal Place of Business:**

1061 WEST ORANGE BLOSSOM TRAIL  
APOPKA, FL 32712 US

**New Principal Place of Business:**

1428 E, SEMORAN BLVD.  
STE 108  
APOPKA, FL 32703 US

**Current Mailing Address:**

1061 WEST ORANGE BLOSSOM TRAIL  
APOPKA, FL 32712 US

**New Mailing Address:**

1428 E, SEMORAN BLVD.  
STE 108  
APOPKA, FL 32703 US

**FEI Number:** 20-4842685      **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:**

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD  
SUITE A-100  
TAMPA, FL 336123425 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: MONICA MCCOWN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MCCOWN, MONICA  
Address: 1403 BLACK WILLOW TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: MGRM  
Name: MONDRAGON, DANIEL  
Address: 993 EAGLES FORREST DRIVE  
City-St-Zip: APOPKA, FL 32712 US

I hereby 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: MONICA MCCOWN

MGRM

02/05/2010

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