2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000050334

Entity Name: THE WICKER STOP, LLC

FILED Nov 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

THE WICKER STOP 4657-S SOUTH US 1 ROCKLEDGE, FL 32955

Current Mailing Address: New Mailing Address:

THE WICKER STOP 4657-S SOUTH US 1 ROCKLEDGE, FL 32955

FEI Number: 20-4892752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JOYCE, KEVIN JOYCE, EILY L MRS
4657-S SOUTH US 1 4657-S SOUTH US 1

POCKLEDGE EL 32955

ROCKLEDGE, FL 32955 US ROCKLEDGE, FL 32955 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: EILY JOYCE 11/30/2009

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MGR

MGR

(X) Change () Addition

(X) Change () Addition

(X) Change () Addition

() Change () Addition

JOYCE, EILY L MRS

4657-S SOUTH US 1

ROCKLEDGE, FL 32955

ELLIOTT, WILLIAM MR

ROCKLEDGE, FL 32955

ELLIOTT, CHRISTINE MRS

ROCKLEDGE, FL 32955

4657-S SOUTH US 1

4657-S SOUTH US 1

Title:

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete

 Name:
 JOYCE, KEVIN M

 Address:
 4657-S SOUTH US 1

 City-St-Zip:
 ROCKLEDGE, FL 32955

 Title:
 MGR
 () Delete

 Name:
 ELLIOTT, WILLIAM

 Address:
 4657-S SOUTH US 1

 City-St-Zip:
 ROCKLEDGE, FL 32955

 Title:
 MGR () Delete

 Name:
 JOYCE, EILY

 Address:
 4657-S SOUTH US 1

 City-St-Zip:
 ROCKLEDGE, FL 32955

Title: MGR (X) Delete Name: ELLIOTT, CHRISTINE Address: 4657-S SOUTH US 1

ROCKLEDGE, FL 32955

City-St-Zip:

MGR (X) Delete

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: EILY JOYCE MGR 11/30/2009