

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000094720

FILED
Sep 21, 2007
Secretary of State

Entity Name: YOUR CORNER BARKERY, LLC

Current Principal Place of Business:

2733 WHISTLER ST
WEST MELBOURNE, FL 32904 US

New Principal Place of Business:

630 ORA DELL AVE
TITUSVILLE, FL 32796 US

Current Mailing Address:

2733 WHISTLER ST
WEST MELBOURNE, FL 32904 US

New Mailing Address:

630 ORA DELL AVE
TITUSVILLE, FL 32796 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

CAMPBELL, COLLEEN
2733 WHISTLER ST
WEST MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

CAMPBELL, COLLEEN J
630 ORA DELL AVE
TITUSVILLE, FL 32796 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: COLLEEN J CAMPBELL

09/21/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CAMPBELL, COLLEEN
Address: 2733 WHISTLER ST
City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: MGRM (X) Delete
Name: CAMPBELL, JASON
Address: 2733 WHISTLER ST
City-St-Zip: WEST MELBOURNE, FL 32904 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CAMPBELL, COLLEEN
Address: 630 ORA DELL AVE
City-St-Zip: TITUSVILLE, FL 32796 US

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: COLLEEN J CAMPBELL

MGRM

09/21/2007

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