

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000101243

Entity Name: CDB'S SOUTHSIDE, LLC

FILED  
Oct 08, 2009  
Secretary of State

**Current Principal Place of Business:**

3671 S. WESTSHORE BOULEVARD  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

3671 S. WESTSHORE BOULEVARD  
TAMPA, FL 33629

**New Mailing Address:**

FEI Number: 20-5732386

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

IACOVELLA, PASQUAL P  
3671 S. WESTSHORE BOULEVARD  
TAMPA, FL 33629 US

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

IACOVELLA, PASQUALE P  
3671 S. WESTSHORE BOULEVARD  
TAMPA, FL 33629 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: PASQUALE P. IACOVELLA

10/08/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: IACOVELLA, PASQUAL P  
Address: 2614 S. DUNDEE STREET  
City-St-Zip: TAMPA, FL 33629

Title: MGR ( ) Delete  
Name: SMITH, JAMES L  
Address: 1002 S. FRANKLAND ROAD  
City-St-Zip: TAMPA, FL 33629

Title: MGR ( ) Delete  
Name: KIM, BUCHANAN  
Address: 922 HEMINGWAY CIRCLE  
City-St-Zip: TAMPA, FL 33602

Title: MGR ( ) Delete  
Name: ROBERT, ROTHMAN  
Address: 201 N. FRANKLIN STREET  
City-St-Zip: TAMPA, FL 33602

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: IACOVELLA, PASQUALE P  
Address: 2614 S. DUNDEE STREET  
City-St-Zip: TAMPA, FL 33629

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: PASQUALE P. IACOVELLA

MGR

10/08/2009

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