

**2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
Oct 09, 2009  
Secretary of State**

DOCUMENT# L06000101475

Entity Name: SARASOTA KITCHENS LLC

**Current Principal Place of Business:**

5651 LAWTON DRIVE  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

5651 LAWTON DRIVE  
SARASOTA, FL 34231

**New Mailing Address:**

FEI Number: 65-1292828      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:**

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

DUFFEK, TOM  
5651 LAWTON DRIVE  
SARASOTA, FL 34231      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: THOMAS P DUFFEK

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: DUFFEK, TOM  
Address: 5356 FOX RUN RD.  
City-St-Zip: SARASOTA, FL 34231

**ADDITIONS/CHANGES:**

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: THOMAS P DUFFEK

OWNE

10/09/2009

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