

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000111769

FILED
Dec 04, 2007
Secretary of State

Entity Name: HOLLYWOOD CREAMERY LLC

Current Principal Place of Business:

3261 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

3261 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 20-5909263 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:

AHMAD, MOHAMMAD
3261 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021 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: MOHAMMAD AHMAD

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AHMAD, MOHAMMAD
Address: 3402 SW 154 COURT
City-St-Zip: MIAMI, FL 33185

Title: MGR () Delete
Name: AHMAD, SAADA
Address: 3402 SW 154 COURT
City-St-Zip: MIAMI, FL 33185

Title: MGR () Delete
Name: AHMAD, ALI
Address: 3402 SW 154 COURT
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES:

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: ABDEL AHMAD

MGR

12/04/2007

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