

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000116122

FILED
May 07, 2008
Secretary of State

Entity Name: WEITZ & KUBICHEK RESTAURANT GROUP, LLC

Current Principal Place of Business:

1501 N. DOYLE CARLTON DR
106
TAMPA, FL 33602 US

New Principal Place of Business:

Current Mailing Address:

1501 N. DOYLE CARLTON DR
106
TAMPA, FL 33602 US

New Mailing Address:

FEI Number: 20-5860233 **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:

WEITZ, DAVID W
1501 N. DOYLE CARLTON DR
UNIT 106
TAMPA, FL 33602 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: DAVID WEITZ

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: WEITZ, DAVID W
Address: 1501 N. DOYLE CARLTON DR, UNIT 106
City-St-Zip: TAMPA, FL 33602 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: KUBICHEK, DEBORAH M
Address: 4221 W. SPRUCE ST, UNIT 1233
City-St-Zip: TAMPA, FL 33607 US

Title: MGR (X) Change () Addition
Name: KUBICHEK, DEBORAH M
Address: 4221 W. SPRUCE ST, UNIT 1233
City-St-Zip: TAMPA, FL 33607 US

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: DAVID WEITZ

CEO

05/07/2008

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