

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000025645

FILED
Sep 28, 2008
Secretary of State

Entity Name: BEARDED BROTHERS LLC

Current Principal Place of Business:

622 SE 2ND ST
BB
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

14005 NW 49TH AVE.
GAINESVILLE, FL 32606

New Mailing Address:

FEI Number: 75-3233662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYERS, MICHAEL R
14005 SE 2ND ST
GAINESVILLE, FL 32606 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: MICHAEL MYERS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MYERS, CATHERINE M
Address: 14005 NW 49TH AVE
City-St-Zip: GAINESVILLE, FL 32606

Title: MGRM () Delete
Name: MYERS, MICHAEL R
Address: 14005 NW 49TH AVE
City-St-Zip: GAINESVILLE, FL 32606

Title: MGRM (X) Delete
Name: FILLIE, CHRISTOPHER L
Address: 514 SW 4TH ST
City-St-Zip: GAINESVILLE, FL 32601

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: MICHAEL MYERS

MGRM

09/28/2008

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