

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000032670

**Entity Name:** SAUCY SPOON, LLC.

**FILED**  
**Oct 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

322 N ALEXANDER ST  
MOUNT DORA, FL 32757 US

**New Principal Place of Business:**

**Current Mailing Address:**

2720 SHOEMAKER LN  
MOUNT DORA, FL 32757

**New Mailing Address:**

**FEI Number:** 20-8725085

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEE, BETH  
2720 SHOEMAKER LANE  
MOUNT DORA, FL 32757 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: BETH LEE

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LEE, BETH  
Address: 2720 SHOEMAKER LANE  
City-St-Zip: MOUNT DORA, FL 32757 US

Title: MGRM  
Name: LEE, BOYD D  
Address: 2720 SHOEMAKER LN  
City-St-Zip: MOUNT DORA, FL 32757

I hereby 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: BOYD LEE

MGRM

10/01/2012

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