

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000053165

Entity Name: TUSCAN MARKET LLC

FILED
Sep 29, 2009
Secretary of State

Current Principal Place of Business:

NOAH'S MARKET DBA
189 E GRANADA RD
ORMOND BEACH, FL 32176 US

New Principal Place of Business:

NOAH'S MARKET DBA
189 E GRANADA BLVD
ORMOND BEACH, FL 32176 US

Current Mailing Address:

NOAH'S MARKET DBA
189 E GRANADA RD
ORMOND BEACH, FL 32176 US

New Mailing Address:

189 E GRANADA BLVD
ORMOND BEACH, FL 32176 US

FEI Number: 26-0264994 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:

SCHIAVONI, MICHAEL
188 FAIRWAY DRIVE
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

SCHIAVONI, MICHAEL
189 E GRANADA BLVD
ORMOND BEACH, FL 32176 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: MICHAEL SCHIAVONI

09/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHIAVONI, MICHAEL
Address: 188 FAIRWAY DRIVE
City-St-Zip: ORMOND BEACH, FL 32176 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCHIAVONI, MICHAEL
Address: 189 E GRANADA BLVD
City-St-Zip: ORMOND BEACH, FL 32176 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: MICHAEL SCHIAVONI

MGRM

09/29/2009

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