

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000054640

Entity Name: SABRE FOODS LLC

FILED  
Mar 19, 2009  
Secretary of State

## Current Principal Place of Business:

551 SE 8TH STREET SUITE 600  
DELRAY BEACH, FL 33483

## New Principal Place of Business:

6820 LYONS TECHNOLOGY CIRCLE  
SUITE 220  
COCONUT CREEK, FL 33073

## Current Mailing Address:

551 SE 8TH STREET SUITE 600  
DELRAY BEACH, FL 33483

## New Mailing Address:

6820 LYONS TECHNOLOGY CIRCLE  
SUITE 220  
COCONUT CREEK, FL 33073

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:

MTS TELECOMMUNICATIONS, INC.  
551 SE 8TH STREET SUITE 600  
DELRAY BEACH, FL 33483 US

## Name and Address of New Registered Agent:

MTS TELECOMMUNICATIONS, INC.  
6820 LYONS TECHNOLOGY CIRCLE  
SUITE 220  
COCONUT CREEK, FL 33073 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: MARC ODROBINA

03/19/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SALDANHA, STEPHEN  
Address: 551 SE 8TH STREET SUITE 600  
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGR (X) Delete  
Name: BJORNMARK, THOMAS  
Address: 551 SE 8TH STREET SUITE 600  
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGR (X) Delete  
Name: BRISKER, ROBERT  
Address: 551 SE 8TH STREET SUITE 600  
City-St-Zip: DELRAY BEACH, FL 33483

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: MTS TELECOMMUNICATIO, NS, INC  
Address: 6820 LYONS TECHNOLOGY CIRCLE  
City-St-Zip: COCONUT CREEK, FL 33073

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: MARC ODROBINA

CFO

03/19/2009

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