2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Sep 28, 2009
Secretary of State

DOCUMENT# L07000067117

Entity Name: MAGNOLIA & BRIGITTA, LLC

Current Principal Place of Business:

7401 WILES ROAD SUITE 232
CORAL SPRINGS, FL 33067 US

New Principal Place of Business:

741 BLUE RIDGE WAY
DAVIE, FL 33325 US

Current Mailing Address:

7401 WILES ROAD SUITE 232
CORAL SPRINGS, FL 33067 US

New Mailing Address:

741 BLUE RIDGE WAY
DAVIE, FL 33325 US

FEI Number: 26-0579084 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: DEBORAH D. SKIPPER

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BARBOSA-CAMPANA, CINTHIA I
Address: 741 BLUE RIDGE WAY
City-St-Zip: DAVIE, FL 33325 US

Title: MGRM ( ) Delete
Name: HOROWITZ, DANIELE
Address: 5455 PINE CIRCLE
City-St-Zip: CORAL SPRING, FL 33067 US

ADDITIONS/CHANGES:

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: CINTHIA I. BARBOSA-CAMPANA MGRM 09/28/2009

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