

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000076125

Entity Name: LITTLE ITALY OF INVERNESS, LLC

FILED
Oct 24, 2008
Secretary of State

Current Principal Place of Business:

124 N APOPKA AVE
INVERNESS, FL 34450

New Principal Place of Business:

Current Mailing Address:

124 N APOPKA AVE
INVERNESS, FL 34450

New Mailing Address:

FEI Number: 26-0636826 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:

Name and Address of New Registered Agent:

COHEN, DIANE ESQ
111 E MIAN ST
STE 203
INVERNESS, FL 34450 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: DIANE COHEN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CALI, ALFREDO
Address: 124 N APOPKA AVE
City-St-Zip: INVERNESS, FL 34450

Title: MGRM () Delete
Name: CALI, DOMENICA M
Address: 124 N APOPKA AVE
City-St-Zip: INVERNESS, FL 34450

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: ALFREDO CALI

MBR

10/24/2008

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