

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000098228

**FILED**  
**Jan 16, 2009**  
**Secretary of State**

**Entity Name:** TWOTWELVE ENTERPRISES, LLC

**Current Principal Place of Business:**

1840 SOUTHWEST 22ND STREET, 4TH FLOOR  
MIAMI, FL 33145

**New Principal Place of Business:**

2580 N. MONROE STREET  
B  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

1840 SOUTHWEST 22ND STREET, 4TH FLOOR  
MIAMI, FL 33145

**New Mailing Address:**

1836 CELTIC ROAD  
TALLAHASSEE, FL 32317

**FEI Number:** 22-3968912      **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:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

DOYLE, THOMAS P  
1836 CELTIC  
TALLAHASSEE, FL 32317 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: THOMAS P DOYLE

01/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: DOYLE, CRAIG D  
Address: 1836 CELTIC ROAD  
City-St-Zip: TALLAHASSEE, FL 32317

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: CRAIG D DOYLE

MGRM

01/16/2009

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