2008 LIMITED LIABILITY COMPANY REINSTATEMENT

REINSTATEMENT					FLED				
DOCUMENT # L07000104896 1. Entity Name PIZZA BAR, LLC					2008 DEC 16 AMII: 13				
Principal Place of Business 1745 JAMES AVE MIAMI BEACH, FL 33139		Mailing Address 1745 JAMES AVE MIAMI BEACH, FL 33139		SECRETARY OF STATE TALLAHASSEE, FLORIDA					
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 9/16 Griffin Rd							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		10312008	REIN-LLC	CR2E1	01 (1/07)		
City & State		Coper City FL		4. FEI Numbe	ſ		→	plied For t Applicable	
Zip	Country	33328	Count	try		of Status Desired	<u> </u>	\$5.00 Addi ee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name					
AGUIAR, DAYAMI 2200 BISCAYNE BLVD 7TH FLOOR MIAMI BEACH, FL 33139				Street Address (P.O. Box Number is Not Acceptable)					
MIAMI BEACH,	FL 33139							-	-
				City			FL	Zip Code	,
	d entity submits this statement for	the purpose of changing its r	registere	ed office or register	ed agent, or bot	h, in the State of Flo	rida. I am f	amiliar with, a	and accept
the obligations of registered agent. Brian Liebum 10-31-08									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW!!! FEE IS \$138.75 After January 1, 2009, Fee will be \$277.50 In accordance with s. 607.193(2)(b), F.S., the liability company did not receive the prior notion									:
							check pa Departme	ayable to ent of State	•
		liability company did					Departme	•	
9. IIILE MGR	2009, Fee will be \$277.50 MANAGING MEMBER	liability company did	10.	eive the prior not	tice.	Florida ADDITIONS/	Departme	Change	☐ Addition
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