

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000122831

FILED  
Nov 03, 2008  
Secretary of State

**Entity Name:** NORTH AMERICAN BANCARD OF FLORIDA, LLC

**Current Principal Place of Business:**

6214 54TH AVE N #207  
KENNETH CITY, FL 33709

**New Principal Place of Business:**

**Current Mailing Address:**

6214 54TH AVE N #207  
KENNETH CITY, FL 33709

**New Mailing Address:**

FEI Number: 26-1511684      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:**

KUKACKA, KELLY M  
6214 54TH AVE N #207  
KENNETH CITY, FL 33709      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: KELLY M. KUKACKA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: KUKACKA, MARTIN  
Address: 6214 54TH AVE N #207  
City-St-Zip: KENNETH CITY, FL 33709

Title: MGR      ( ) Delete  
Name: KUKACKA, KELLY  
Address: 6214 54TH AVE N #207  
City-St-Zip: KENNETH CITY, FL 33709

**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: KELLY M. KUKACKA

MGR

11/03/2008

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