

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000066211

**FILED**  
**Apr 10, 2010**  
**Secretary of State**

**Entity Name:** THOMAS ANTONIOU & CO., LLC

**Current Principal Place of Business:**

9724 TREYBURN COURT  
ELLCOTT CITY, MD 21042

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1446  
ELLCOTT CITY, MD 210411446

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

JOEL FRIEND AND ASSOCIATES, INC.  
2863 EXECUTIVE PARK DRIVE  
SUITE 105  
WESTON, FL 33331 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: JOEL FRIEND

04/10/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ANTONIOU, THOMAS S  
Address: 9724 TREYBURN COURT  
City-St-Zip: ELLCOTT CITY, MD 21042

I hereby 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: THOMAS ANTONIOU

MGR

04/10/2010

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