

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000084896

Entity Name: FRIENDLY PUPPY, LLC

FILED
Oct 08, 2009
Secretary of State

Current Principal Place of Business:

905 BRICKELL BAY DRIVE
SUITE 827
MIAMI, FL 33131

New Principal Place of Business:

830 S.E. 1 AVE
MIAMI, FL 33131

Current Mailing Address:

905 BRICKELL BAY DRIVE
SUITE 827
MIAMI, FL 33131

New Mailing Address:

830 S.E. 1 AVE
MIAMI, FL 33131

FEI Number: 26-3305156 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:

DENNIS, KEVIN D ESQUIRE
999 BRICKELL AVENUE
SUITE 700
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: KEVIN D DENNIS ESQUIRE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SJOSTROM, ELVIS
Address: 905 BRICKELL BAY DRIVE
City-St-Zip: MIAMI, FL 33131

Title: MGRM (X) Delete
Name: ORTIZ, FRANCIS
Address: 5720 SW 94TH PLACE
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SJOSTROM, ELVIS E
Address: 905 BRICKELL BAY DRIVE SUITE 227
City-St-Zip: MIAMI, FL 33131

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: ELVIS E. SJOSTROM

MGRM

10/08/2009

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