

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000096761

**Entity Name:** THE ARMS ROOM LLC

**FILED**  
**Sep 27, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1372 N GOLDENROD RD, 24  
ORLANDO, FL 32807 US

**New Principal Place of Business:**

**Current Mailing Address:**

3651 CAESAR AVE  
ORLANDO, FL 32833 US

**New Mailing Address:**

**FEI Number:** 26-4367050

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PIWOWARSKI, MICHAEL P  
3651 CAESAR AVE  
ORLANDO, FL 32833 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:** MICHAEL P. PIWOWARSKI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** PIWOWARSKI, MICHAEL P  
**Address:** 3651 CAESAR AVE  
**City-St-Zip:** ORLANDO, FL 32833 US

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:** MICHAEL P. PIWOWARSKI

MGR

09/27/2010

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