

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000100280

FILED
Nov 30, 2009
Secretary of State

Entity Name: PLAYERS CHOICE POKER TOUR, LLC

Current Principal Place of Business:

809 EAST BLOOMINGDALE AVE.
SUITE 380
BRANDON, FL 33511

New Principal Place of Business:

6370 ALAMANDAS HILLS DR
LAKELAND, FL 33813

Current Mailing Address:

809 EAST BLOOMINGDALE AVE.
SUITE 380
BRANDON, FL 33511

New Mailing Address:

6370 ALAMANDAS HILLS DR
LAKELAND, FL 33813

FEI Number: 26-3625742 **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:

LABARBERA, RICHARD C
890 EAST BLOOMINGDALE AVE
SUITE 380
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

LABARBERA, RICHARD C
6370 ALAMANDAS HILLS DR
LAKELAND, FL 33813 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: RICHARD C LABARBERA

11/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LABARBERA, MICHELE
Address: 809 EAST BLOOMINGDALE AVE. SUITE 380
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LABARBERA, MICHELE
Address: 6370 ALAMANDAS HILLS DR
City-St-Zip: LAKELAND, FL 33813

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: MICHELE LABARBERA

MGR

11/30/2009

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