

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000100847

FILED
Oct 15, 2009
Secretary of State

Entity Name: CITY CROSSINGS PIZZA, LLC

Current Principal Place of Business:

9393 EAST FOWLER AVE.
THONOTOSASSA, FL 33592 US

New Principal Place of Business:

Current Mailing Address:

9393 EAST FOWLER AVE.
THONOTOSASSA, FL 33592 US

New Mailing Address:

FEI Number: 26-3614218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

USA-RA LLC
841 PRUDENTIAL DRIVE
12TH FLOOR
JACKSONVILLE, FL 32207 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: USA-RA LLC

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DECKER, SCOTT
Address: 9350 WELLINGTON PARK CIRCLE
City-St-Zip: TAMPA, FL 33647 US

Title: MGRM () Delete
Name: GAUDINEER, JOHN
Address: 19109 LARCHMONT DR.
City-St-Zip: ODESSA, FL 33556 US

Title: MGRM () Delete
Name: HUGHES, SHEA
Address: 15 S TREASURE DRIVE
City-St-Zip: TAMPA, FL 33609 US

Title: MGRM () Delete
Name: HERNANDEZ II, ARMONDO
Address: 10402 SHALIMAR WOOD DRIVE
City-St-Zip: THONOTOSASSA, FL 33592 US

Title: MGRM () Delete
Name: HERNANDEZ, CARMEN
Address: 18304 GULF BLVD., #502
City-St-Zip: REDINGTON SHORES, FL 33708

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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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: JOHN GAUDINEER

MGRM

10/15/2009

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