

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000077511

**Entity Name:** WOLF'S DEN LLC

**FILED**  
**Dec 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

16105 NE 18 AVE  
NORTH MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

16105 NE 18 AVE  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOHLFELD, ROBERT  
16105 NE 18 AVE  
NORTH MIAMI, FL 33162 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: ROBERT WOHLFELD

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WOHLFELD, ROBERT  
Address: C/O LAW OFFICE VICTOR RONES16105 NE 18 AVE  
City-St-Zip: NORTH MIAMI, FL 33162

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: ROBERT WOHLFELD

MGRM

12/21/2011

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