

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000097397

**FILED**  
**Jan 16, 2012**  
**Secretary of State**

**Entity Name:** SUGAR COVE LLC

**Current Principal Place of Business:**

1341 SCOTT AVENUE  
WINNETKA, IL 60093 US

**New Principal Place of Business:**

**Current Mailing Address:**

1341 SCOTT AVENUE  
WINNETKA, IL 60093 US

**New Mailing Address:**

**FEI Number:** 27-1707218

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRYE, AUSTIN A ESQ  
20900 WEST DIXIE HIGHWAY  
AVENTURA, FL 33180 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: AUSTIN A FRYE, ESQ.

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WILSON, JAMES C  
Address: 1341 SCOTT AVE  
City-St-Zip: WINNETKA, IL 60093 US

Title: MGRM  
Name: WILSON, ANDREW J  
Address: 16566 HASCALL  
City-St-Zip: OMAHA, NE 68130

Title: MGRM  
Name: WILSON, MARK A  
Address: 207 SE 9 STREET  
City-St-Zip: DANIA, FL 33004 US

Title: MGRM  
Name: WILSON, ROBERT S  
Address: 11909 WISHING WELL CT  
City-St-Zip: FRISCO, TX 75035 US

Title: MGRM  
Name: COHEN, PAULA  
Address: 3854 AHONUI PLACE  
City-St-Zip: PRINCEVILLE, HI 96722 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: ANDREW J WILSON

MGRM

01/16/2012

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