

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000102980

**Entity Name:** MERCHANDISE PARTNERS, LLC

**FILED**  
**Nov 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

11111 NORTH 46TH STREET  
TAMPA, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

11111 NORTH 46TH STREET  
TAMPA, FL 33617

**New Mailing Address:**

FEI Number: 61-1606781      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

GOVIN, KEVIN A  
11111 NORTH 46TH STREET  
TAMPA, FL 33617 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: CHARLES M. SCHROEDER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GOVIN, KEVIN A  
Address: 302 ROYAL PALM WAY  
City-St-Zip: TAMPA, FL 33609

Title: MGRM  
Name: GOVIN, R. MARK  
Address: 18015 KINGS PARK DRIVE  
City-St-Zip: TAMPA, FL 33647

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: CHARLES M. SCHROEDER

FO

11/29/2011

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