

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000132144

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

**Entity Name:** AMERICAN FOOD RECOVERY LLC

**Current Principal Place of Business:**

18520 NW 67 AVE  
279  
MIAMI, FL 33015 US

**New Principal Place of Business:**

3397 NW 67 STREET  
MIAMI, FL 33147 US

**Current Mailing Address:**

18520 NW 67 AVE  
279  
MIAMI, FL 33015 US

**New Mailing Address:**

3397 NW 67 STREET  
MIAMI, FL 33147 US

**FEI Number:** 27-4446538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BARRERO, NELSON  
18520 NW 67 AVE  
279  
MIAMI, FL 33015 US

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

MUSTELIER, MARIA  
3397 NW 67 STREET  
MIAMI, FL 33147 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: MARIA A MUSTELIER

01/10/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: MUSTELIER, MARIA  
Address: 3397 NW 67 STREET  
City-St-Zip: MIAMI, FL 33147 US

Title: V.P  
Name: REYNET, FANNY  
Address: 3397 NW 67 STREET  
City-St-Zip: MIAMI, FL 33147

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: MARIA A MUSTELIER

P

01/10/2012

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