

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000055871

FILED
Dec 02, 2012
Secretary of State

Entity Name: ANATOMY PROMOTIONS L.L.C.

Current Principal Place of Business:

5 FRATERNITY ROW
GAINESVILLE, FL 32603 US

New Principal Place of Business:

510 NW 15TH ST
GAINESVILLE, FL 32603 US

Current Mailing Address:

5 FRATERNITY ROW
GAINESVILLE, FL 32603 US

New Mailing Address:

510 NW 15TH ST
GAINESVILLE, FL 32603 US

FEI Number: 80-0735811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOHMANN, ADAM
898 NE 78TH ST.
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

LOHMANN, ADAM S
510 NW 15TH ST
GAINESVILLE, FL 32603 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: ADAM LOHMANN

12/02/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LOHMANN, ADAM S
Address: 510 NW 15TH ST
City-St-Zip: GAINESVILLE, FL 32603 US

Title: MGR
Name: BRYAN, KEVIN P
Address: 1440 NW 3RD PLACE, APT. 205
City-St-Zip: GAINESVILLE, FL 32603 US

Title: MGR
Name: SOKOLOW, ANDREW B
Address: 703 SW 9TH ST
City-St-Zip: GAINESVILLE, FL 32601 US

Title: MGR
Name: LASHBROOK, MICHAEL D
Address: 2905 SW ARCHER RD
City-St-Zip: GAINESVILLE, FL 32608 US

Title: MGR
Name: FITTERMAN, JORDAN R
Address: 45 TREEVIEW DR
City-St-Zip: MELVILLE, NY 11747 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: ADAM LOHMANN

MGR

12/02/2012

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