

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000072999

**FILED**  
**Oct 08, 2012**  
**Secretary of State**

**Entity Name:** T & K SNACK DISTRIBUTORS, LLC

**Current Principal Place of Business:**

1360 CHRIS AVE.  
DELAND, FL 32724

**New Principal Place of Business:**

**Current Mailing Address:**

1360 CHRIS AVE.  
DELAND, FL 32724

**New Mailing Address:**

**FEI Number:** 45-2591681

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS W LEVEN  
1360 CHRIS AVE.  
DELAND, FL 32724 US

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

LEVEN, THOMAS W  
1360 CHRIS AVE.  
DELAND, FL 32724 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: THOMAS W LEVEN

10/08/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LEVEN, THOMAS W  
Address: 1360 CHRIS AVE.  
City-St-Zip: DELAND, FL 32724

Title: MGRM  
Name: LEVEN, KAREN L  
Address: 1360 CHRIS AVE.  
City-St-Zip: DELAND, FL 32724

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: THOMAS W LEVEN

MGRM

10/08/2012

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