

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000071011

**FILED**  
**Nov 01, 2013**  
**Secretary of State**

**Entity Name:** ALPHAOMEGA&KENNY LLC

**Current Principal Place of Business:**

4001 W LINE BOUGH AVE.  
TAMPA, FL 33624 US

**New Principal Place of Business:**

4001 W LINEBAUGH AVE  
TAMPA, FL 33624 US

**Current Mailing Address:**

4001 W LINE BOUGH AVE.  
TAMPA, FL 33624 US

**New Mailing Address:**

4001 W LINEBAUGH AVE  
TAMPA, FL 33624 US

**FEI Number:** 45-5377322

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAK COURT  
SUITE A  
TAMPA, FL 33612 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: USCA INC

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: OLADAPO, TOBI  
Address: 4001 W LINEBAUGH AVE.  
City-St-Zip: TAMPA, FL 33624 US

Title: MGRM  
Name: OLADAPO, KEHINDE  
Address: 4001 W LINEBAUGH AVE.  
City-St-Zip: TAMPA, FL 33624 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: KEHINDE OLADAPO

MGRM

11/01/2013

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