

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000103637

Entity Name: JUICE BOX USA LLC

**FILED**  
**Sep 07, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

4303 W BARCELONA ST  
TAMPA, FL 33629

**New Principal Place of Business:**

4608 N HALE AVE.  
TAMPA, FL 33614

**Current Mailing Address:**

4303 W BARCELONA ST  
TAMPA, FL 33629

**New Mailing Address:**

4608 N HALE AVE.  
TAMPA, FL 33614

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

BECKER, KIRSTEN  
4303 W BARCELONA ST  
TAMPA, FL 33629 US

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

BECKER, KIRSTEN  
4608 N HALE AVE.  
TAMPA, FL 33614 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: KIRSTEN BECKER

09/07/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: BECKER, KIRSTEN  
Address: 4608 N HALE AVE.  
City-St-Zip: TAMPA, FL 33614

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: KIRSTEN BECKER

MGR

09/07/2014

Electronic Signature of Authorized Person

Date