

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L96000001250

**Entity Name:** FRANCONIA, L.C.

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

769 NE 36 STREET  
OAKLAND PARK, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

769 NE 36 STREET  
OAKLAND PARK, FL 33334

**New Mailing Address:**

**FEI Number:** 65-0712502

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MICHAEL FELDENKRAIS, P.A.  
MICHAEL FELDENKRAIS, ESQ.  
12000 BISCAYNE BLVD., SUITE 220  
MIAMI, FL 33181 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:** MICHAEL FELDENKRAIS

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** TSCHAMPKE, DETLEF  
**Address:** 769 NE 36TH STREET  
**City-St-Zip:** OAKLAND PARK, FL 33334

**Title:** MGRM  
**Name:** KREWSON, THOMAS D  
**Address:** 1355 W. CANAL STREET NORTH  
**City-St-Zip:** BELLE GLADE, FL 33430

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:** DETLEF TSCHAMPKE

MGRM

04/29/2012

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