

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L99000003352

**FILED**  
**Jan 20, 2005**  
**Secretary of State**

**Entity Name:** TROPICAL BREEZE SMOOTHIES L.L.C.

**Current Principal Place of Business:**

3201 E. COLONIAL DR.  
ORLANDO, FL 32708

**New Principal Place of Business:**

**Current Mailing Address:**

543 ONE CENTER BLVD. APT. 202  
ORLANDO, 32701

**New Mailing Address:**

3201 E. COLONIAL DR.  
ORLANDO, FL 32708

**FEI Number:** 65-0926387      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134      US

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

BRIAN, TOLLEFSON  
21551 ARBOR WAY  
BOCA RATON, FL 33433      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: BRIAN TOLLEFSON

01/20/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM      ( ) Delete  
Name: TOLLEFSON, BRIAN J  
Address: 543 ONE CENTER BLVD. APT. 202  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: TOLLEFSON, BRIAN J  
Address: 21551 ARBOR WAY  
City-St-Zip: BOCA RATON, FL 33433

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: BRIAN TOLLEFSON

MGRM

01/20/2005

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