APR. 13. 2006 3:08PM CORPORATION SVC CO NO. 557 P. 3

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED

2006 MAY 12 PM 2:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M02000003451

1. Entity Name
ALTAMONTE SPRINGS DRUG STORE HOLDINGS, L.L.C.

BK

Principal Place of Business
113 MAITLAND AVENUE
ALTAMONTE SPRINGS, FL 32701

Mailing Address
SUPPORT ★OUR★ TROOPS
Mr. Walter Rosenstock
182 Stone Manor Dr
Somerset, NJ 08873-6019

04132006 REIN-LLC CR2E101 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State 05	
Zip	Country	Zip	Country

4. FEI Number 22-3585996 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Kimberly B. Moret Kimberly B. Moret as its agent 5/11/06
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required by F.S. 605.0116) DATE

FILE NOW!!! FEE IS $200.00

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR ROSENSTOCK, WALTER Mr. Walter Rosenstock 182 Stone Manor Dr Somerset, NJ 08873-6019	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 400075384534 05/26/06--01059--018 **200.00
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REINSTATEMENT 2005-2006

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Walter Rosenstock 5-8-06 732-560-0660
SIGNATURE AND TYPED OR PRINTED NAME OF ELECTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #