

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED**  
**Oct 26, 2009**  
**Secretary of State**

DOCUMENT# M03000001559

**Entity Name:** CALEB HALEY & CO., LLC

**Current Principal Place of Business:**

800 FOOD CENTER DR.  
UNIT 110  
BRONX, NY 10474

**New Principal Place of Business:**

**Current Mailing Address:**

800 FOOD CENTER DR.  
UNIT 110  
BRONX, NY 10474

**New Mailing Address:**

**FEI Number:** 80-0003251      **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:**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: JOANNE MCCARTHY ASST SECRETARY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SMITH, NEIL H  
Address: 3600 MYSTIC POINTE DRIVE, #PH-14  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM ( ) Delete  
Name: DRIANSKY, MICHAEL  
Address: 6 HANTHORNE CTR  
City-St-Zip: N. SALEM, NY 10560

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL DRIANSKY

VP

10/26/2009

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