

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M03000001589

Entity Name: TUGZ COMPANY LLC

**FILED**  
**Oct 02, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

17 BATTERY PLACE  
1200  
NEW YORK, NY 10004

**New Principal Place of Business:**

**Current Mailing Address:**

17 BATTERY PLACE  
1200  
NEW YORK, NY 10004

**New Mailing Address:**

17 BATTERY PLACE  
ROOM 1200  
NEW YORK, NY 10004

FEI Number: 13-4250980

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY  
1201 HAY STREET  
TALLAHASSEE, FL 32301 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: BEVERLY F. REILLY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: TUGZ INTERNATIONAL,, LLC  
Address: 1800 TERMINAL TOWER, 50 PUBLIC SQUARE  
City-St-Zip: CLEVELAND, OH 44113

Title: MGRM (X) Delete  
Name: MCALLISTER TOWING OF, FLORIDA, INC.  
Address: 17 BATTERY PLACE  
City-St-Zip: NEW YORK, NY 10004

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MCALLISTER TOWING OF, FLORIDA INC.  
Address: 17 BATTERY PLACE  
City-St-Zip: NEW YORK, NY 10004

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BEVERLY F. REILLY

VP

10/02/2006

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