

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M04000002869

Entity Name: WEASLE ENTERPRISES, LLC

**FILED**  
**Oct 18, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

912 WEST PLYMOUTH STREET  
TAMPA, FL 33603

**New Principal Place of Business:**

1704 N. LINCOLN AVE.  
TAMPA, FL 33607

**Current Mailing Address:**

912 WEST PLYMOUTH STREET  
TAMPA, FL 33603

**New Mailing Address:**

1704 N. LINCOLN AVE.  
TAMPA, FL 33607

FEI Number: 20-1203020      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:**

KAGAN, EDWIN B  
2709 ROCKY POINT DR., SUITE 102  
TAMPA, FL 33607      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: EDWIN B. KAGAN

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: EUBANKS, STEVEN  
Address: 912 WEST PLYMOUTH STREET  
City-St-Zip: TAMPA, FL 33603

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change ( ) Addition  
Name: EUBANKS, STEVEN  
Address: 1704 N. LINCOLN AVE.  
City-St-Zip: TAMPA, FL 33607

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: STEVEN EUBANKS

MGRM

10/18/2005

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