2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # M0700002772						FILE)			
1. Entity Name THE KING LOCKSMITH, LLC						DEC 16 A				
Principal Place of Business Mailing Address					SEC	PETARY OF I AHASSEE, F	STATE			
· .	TREE INDUSTRIAL BLVD.	6761 REACHTREE INDUSTRIAL BLVD. ATLANTA GA 30360			IALL	ahassee, f	LOR ida			
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 3551 Holcomb Bridge Rol 2526 Mt. Ver			2002	RQ.						
Suite, Apt.	#, etc. <i>O</i>	Suite, Apt. #, etc.			12082008	REIN-LLC	CR2E10			
City & State	oss, GA	Dunwoody, SA			4. FEI Numb 20-522				Applicable	
Zip Country A		2/228	ountry LICA	5. Certificate of Status Desired			\$5.00 Additional Fee Required			
	6. Name and Address of Current F	Registered Agent	4.511		7. Name and	Address of New I				
C T CORPORATION SYSTEM										
1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)						
			City		- <u>-</u> -		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 Signature, typed or printed name of registered agent and title II applicable. (NOTE: Registered Agent signature required when reinstating) OATE										
FILE NOWILL FEE IS \$138.75 + 5. After January 1, 2009, Fee will be \$277.50 A 1 3 7 5 In accordance with s. 607.193(2)(b), F.S., the lir liability company did not receive the prior notice							ke check pay la Departmen			
9.	MANAGING MEMBER	RS/MANAGERS	10.			ADDITIONS	/CHANGES	Change	Addition	
TITLE NAME	BITON, LIOR NA			205	مالية ا	omb Br			_	
STREET ADDRESS CITY-ST-ZIP	6 6761 PEACHTREE INDUSTRIAL BLVD. STA ATLANTA, GA 30360 CT			26-	01 1101C	iomo br	3009	. کر	500	
TITLE	MGRM	Delete	TITLE	7 00	<u>,, </u>	<u> </u>	<u>، – ر ر </u>	Change	Addition	
NAME STREET ADDRESS	BITON, YASMIN 6761 PEACHTREE INDUSTRIAL BLVD. STR			3851 Holomb Bridge Rd. #300						
CITY-ST-ZIP	ATLANTA, GA 30360					SIGA	3009	2		
TITLE		☐ Delete	TITLE NAME				-	Change	☐ Addition	
NAME STREET ADDRESS			STREET ADDRESS		12/1	981清幕	9916	Ы∪ **143.	75	
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CITY-ST-ZIP	REINSTA	IEMENI	Grif S - ZIP		substant	itho			<u>, </u>	
TITLE NAME		☐ Delete	TITLE NAME	1	James	()t-	KΛ			
STREET ADDRESS			STREET ADDRESS	"	EVICE	m	. T		<i>v</i>	
CITY-ST-ZIP	certify that the information conclined with	this filling does not qualify for the	CITY-ST-ZIP	nntained	in Chanter 119	Florida Statutos 1	further certify the	nat the info	mation	
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 it made under cath; that I am a managing member or manager of the limited liability company or the receiver or truttee empowered to execute this report as required by Chapter 608, Florida Statutes.										
SIGNATURE: 10/11/08 170-245-3019										
SIGNATURE: 10-111108 - 170-2415 - 10-111108 - 10-11108 - 10-1110										