2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000119513

Entity Name: KNISH NOSH, INC.

FILED Dec 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

% JAMES MARX, P.A.

848 BRICKELL AVENUE, SUITE 750

MIAMI, FL 33131

100-30 QUEENS BLVD.
FOREST HILLS, NY 11375

Current Mailing Address: New Mailing Address:

% JAMES MARX, P.A.

848 BRICKELL AVENUE, SUITE 750
MIAMI, FL 33131

100-30 QUEENS BLVD.
FOREST HILLS, NY 11375

FEI Number: 02-0656201 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MARX, JAMES ESQ. 848 BRICKELL AVENUE SUITE 750 MIAMI, FL 33131 US MARX, JAMES ESQ. 2850 BRICKELL AVENUE MIAMI, FL 33129 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: JAMES MARX 12/18/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: SCHNEIDERMAN, HAIG
Address: 848 BRICKELL AVE #750

City-St-Zip: MIAMI, FL 33131

Title: () Delete

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: SCHNEIDERMAN, HAIG
Address: 25 CENTRAL PARK WEST, 7-E
City-St-Zip: NEW YORK, NY 10023

Title: VP () Change (X) Addition

Name: CAUFF, BRIAN

Address: 8688 YELLOW ROSE COURT City-St-Zip: BOYTON BEACH, FL 33437

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAIG SCHNEIDERMAN PRES 12/18/2008