

**2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L15000192203

**Entity Name:** DARK ALLEY DISTRIBUTION, LLC

**Current Principal Place of Business:**

4005 NE 6TH AVE  
OAKLAND PARK, FL 33334

**Current Mailing Address:**

4005 NE 6TH AVE  
OAKLAND PARK, FL 33334 US

**FEI Number:** 47-5600420

**Certificate of Status Desired:** Yes

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

FELT, ROBERT O  
4481 NW 19TH TER  
OAKLAND PARK, FL 33339 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:** ROBERT FELT

10/24/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name FELT, ROBERT O  
Address 4481 NW 19TH TERRACE  
City-State-Zip: OAKLAND PARK FL 33339

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT FELT

OWNER

10/24/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date