## 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L04000003088

Entity Name: SHE-SHE LLC

FILED Oct 09, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3017 HENDON CT 5538 SHIRLEY STREET NAPLES, FL 34105 NAPLES, FL 34109 **Current Mailing Address: New Mailing Address:** 3017 HENDON CT 5538 SHIRLEY STREET NAPLES, FL 34105 NAPLES, FL 34109 FEI Number: 16-1660265 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: BELL-CARR, ELIZABETH C CARR, ELIZABETH C CEO 3017 HENDON CT 3017 HENDON CT NAPLES, FL 34105 US NAPLES, FL 34105 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: X 10/09/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: (X) Change ( ) Addition () Delete BELL-CARR, ELIZABETH C BELL-CARR, ELIZABETH C CEO Name: Name: 3017 HENDON CT. Address: 3017 HENDON CT. Address: City-St-Zip: NAPLES, FL 34105 City-St-Zip: NAPLES, FL 34105 Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: CARR, MICHAEL J VP Address: Address: 5538 SHIRLEY STREET City-St-Zip: City-St-Zip: NAPLES, FL 34109 Title: () Delete Title: MOF ( ) Change (X) Addition SZTWIERTNIA, ANIA MGR Name: Name: 5538 SHIRLEY STREET Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34109 Title: () Delete Title: MOL ( ) Change (X) Addition Name: Name: KAVANAGH, MICHAEL MOL 5538 SHIRLEY STREET Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34109 Title: () Delete Title: CEO ( ) Change (X) Addition BELL, RICHARD P CFO Name: Name: 5538 SHIRLEY STREET Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34109 Title: () Delete Title: ( ) Change (X) Addition CARR, MCKENZIE C QOS Name: Name: Address: Address: 5538 SHIRLEY STREET NAPLES, FL 34105 City-St-Zip: City-St-Zip:

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: ELIZABETH BELL-CARR CEO 10/09/2005