

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000009010

FILED
Mar 14, 2007
Secretary of State

Entity Name: FASHION HUT, LLC

Current Principal Place of Business:

3441 E. COLONIAL DR., SUITE F-32
ORLANDO, FL 32803

New Principal Place of Business:

3251 E. COLONIAL DR., SUITE D-68
ORLANDO, FL 32803

Current Mailing Address:

3441 E. COLONIAL DR., SUITE F-32
ORLANDO, FL 32803

New Mailing Address:

3251 E. COLONIAL DR., SUITE D-68
ORLANDO, FL 32803

FEI Number: 20-0679876 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

MANOCHA, GEETA
3441 E. COLONIAL DRIVE, SUITE F-32
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

MANOCHA, GEETA
3251 E. COLONIAL DR., SUITE D-68
ORLANDO, FL 32803 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: GM

03/14/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MANOCHA, GEETA
Address: 3441 E. COLONIAL DRIVE, SUITE F-32
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MANOCHA, GEETA
Address: 3251 E. COLONIAL DR., SUITE D-68
City-St-Zip: ORLANDO, FL 32803

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GM

MGRM

03/14/2007

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