

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000036602

Entity Name: SALON CARDE, L.L.C.

FILED
Oct 11, 2005
Secretary of State

Current Principal Place of Business:

612 W. PLATT STREET
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

11912 CYPRESS VISTA CIRCLE
TAMPA, FL 33626

New Mailing Address:

307 N. MACDILL AVENUE
TAMPA, FL 33609

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

CARDE, STEVEN
11912 CYPRESS VISTA CIRCLE
TAMPA, FL 33626 US

Name and Address of New Registered Agent:

CARDE, STEVEN
307 N. MACDILL AVENUE
TAMPA, FL 33609 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: STEVEN CARDE

10/11/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CARDE, STEVEN
Address: 11912 CYPRESS VISTA CIRCLE
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CARDE, STEVEN
Address: 307 N. MACDILL AVENUE
City-St-Zip: TAMPA, FL 33609

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: STEVEN CARDE

MGRM

10/11/2005

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