2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000038234

Entity Name: PRESTIGE IMAGE LLC

City-St-Zip:

TALLAHASSEE, FL 32311

FILED Oct 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1099 WINTER LANE TALLAHASSEE, FL 32311 **Current Mailing Address: New Mailing Address:** P O BOX 38520 TALLAHASSEE, FL 32315 FEI Number: 27-0091202 FEI Number Applied For () FEI Number Not Applicable () 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: Name and Address of New Registered Agent: LUJAN, VICTOR 1099 WINTER LANE TALLAHASSEE, FL 32311 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: VICTOR E LUJAN Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete LUJAN, VICTOR Name: Name: Address: 1099 WINTER LANE Address: City-St-Zip: TALLAHASSEE, FL 32311 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition Name: GONZALEZ, LOUIS Name: GONZALEZ, LUIS Address: 1099 WINTER LANE Address: 1099 WINTER LANE City-St-Zip: TALLAHASSEE, FL 32311 City-St-Zip: TALLAHASSEE, FL 32311 Title: MGR () Delete Title: () Change () Addition RODARTE, JUAN Name: Name: 1099 WINTER LANE Address: Address:

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 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.

City-St-Zip:

SIGNATURE: VICTOR LUJAN MGRM 10/16/2007