

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000039789

Entity Name: BELLISSIMA SALON, LLC

**FILED**  
**Jan 03, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

2477 NORTH WEST 97TH AVENUE  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

4624 N.W. 114 AVE., #907  
MIAMI, FL 33178

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) 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:**

MORRISON, JAMES  
4624 N.W. 114 AVE., #907NUE  
MIAMI, FL 33178 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: JAMES MORRISON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ZAPORTA, MONICA  
Address: 2477 NORTH WEST 97TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: MGRM ( ) Delete  
Name: MORRISON, ANGELICA  
Address: 2477 NORTH WEST 97TH AVENUE  
City-St-Zip: MIAMI, FL 33172

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANGELICA MORRISON

MGRM

01/03/2006

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