

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000013430

**FILED**  
**Mar 12, 2012**  
**Secretary of State**

**Entity Name:** SRIM HRIM ENTERPRISES, LLC

**Current Principal Place of Business:**

8900 E IRLO BROWSON HWY  
SAINT CLOUD, FL 34773

**New Principal Place of Business:**

**Current Mailing Address:**

8900 E IRLO BROWSON HWY  
SAINT CLOUD, FL 34773

**New Mailing Address:**

**FEI Number:** 20-2329380

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAMBARRAN, OSCAR  
2896 PAYNES PRAIRIE CIRCLE  
KISSIMMEE, FL 34743 US

**Name and Address of New Registered Agent:**

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:** OSCAR RAMBARRAN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** RAMBARRAN, OSCAR  
**Address:** 2896 PAYNES PRAIRIE CIRCLE  
**City-St-Zip:** KISSIMMEE, FL 34743

**Title:** MGRM  
**Name:** RAMBARRAN, HAYMAN  
**Address:** 3198 TOHO COURT  
**City-St-Zip:** KISSIMMEE, FL 34744

**Title:** MGRM  
**Name:** PATEL, KIRANBHAI J  
**Address:** 413 JAMES PLACE  
**City-St-Zip:** ST. CLOUD, FL 34769

**Title:** MGRM  
**Name:** PATEL, SUNILKUMAR J  
**Address:** 413 JAMES PLACE  
**City-St-Zip:** ST. CLOUD, FL 34769

I hereby 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:** OSCAR RAMBARRAN

MGRM

03/12/2012

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