

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000021206

Entity Name: ANGIE'S UNISEX, LLC.

**FILED**  
**Feb 03, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

515 SW 12 AVENUE  
523  
MIAMI, FL 33130 US

**New Principal Place of Business:**

**Current Mailing Address:**

515 SW 12 AVENUE  
523  
MIAMI, FL 33130 US

**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:**

TORRES, ANGELA P  
515 SW 12 AVENUE  
523  
MIAMI, FL 33130 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: ANGELA TORREZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: TORRES, ANGELA P  
Address: 3251 NW 14 STREET  
City-St-Zip: MIAMI, FL 33125 US

**ADDITIONS/CHANGES:**

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: ANGELA TORREZ

MR.

02/03/2007

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