2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Sep 29, 2009
Secretary of State

DOCUMENT# L05000058963

Entity Name: CLEANING BY SUE,LLC

Current Principal Place of Business:

160 KIRBY THOMPSON RD.1
ALVA, FL 33920

New Principal Place of Business:

305 KIRBY THOMPSON RD.
ALVA, FL 33920

Current Mailing Address:

P.O. BOX 181
ALVA, FL 33920

New Mailing Address:

P.O. BOX 181
ALVA, FL 33920 LE

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:

LARSON, SUSAN J
160 KIRBY THOMPSON RD.
ALVA, FL 33920 US

Name and Address of New Registered Agent:

LARSON, SUSAN J
305 KIRBY THOMPSON RD.
ALVA, FL 33920 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: SUSAN J. LARSON 09/29/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: OWNE ( ) Delete
Name: LARSON, SUSAN J OWNER
Address: 305 KIRBY THOMPSON RD.
City-St-Zip: ALVA, FL 33920 HE

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 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: SUSAN J. LARSON OWNE 09/29/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date