

105.00

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000068863

1. Entity Name
MARIA CLEANING SERVICE, LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 FEB -8 AM 10:29

Principal Place of Business
2426 CHEROKEE AVENUE
WEST PALM BEACH, FL 33409

Mailing Address
2426 CHEROKEE AVENUE
WEST PALM BEACH, FL 33409



2. Principal Place of Business - No P O Box #

3. Mailing Address

Suite, Apt #, etc

Suite, Apt #, etc.

01252007 REIN-LLC CR2E101 (1/07)

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

IMPERIAL CLEANING CORP
15476 NW 77TH COURT #336
MIAMI LAKES, FL 33016

7. Name and Address of New Registered Agent

Name

Street Address (P O Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Maria Mateo

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2/5/07

DATE

FILE NOW!!! FEE IS \$100.00

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE: MGR
NAME: MATEO, MARIA P
STREET ADDRESS: 2426 CHEROKEE AVENUE
CITY-ST-ZIP: WEST PALM BEACH, FL 33409

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: Change Addition
CITY-ST-ZIP: Change Addition

TITLE: Delete
NAME: Delete
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Maria Mateo*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2/5/07

DATE

Daytime Phone #

REINSTATEMENT 06-07

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