

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000123444

**FILED**  
**Sep 17, 2007**  
**Secretary of State**

**Entity Name:** MASTERS CLEANING CONCEPTS, LLC

**Current Principal Place of Business:**

481 PINE VIEW TRAIL  
KISSIMMEE, FL 34747 US

**New Principal Place of Business:**

**Current Mailing Address:**

481 PINE VIEW TRAIL  
KISSIMMEE, FL 34747 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:**

ROSSI, ANAZILMA  
481 PINE VIEW TRAIL  
KISSIMMEE, FL 34747 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: ANAZILMA ROSSI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ROSSI, ANAZILMA  
Address: 481 PINE VIEW TRAIL  
City-St-Zip: KISSIMMEE, FL 34747 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 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: ANAZILMA ROSSI

MNG

09/17/2007

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