

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000017407

**FILED**  
**Oct 04, 2010**  
**Secretary of State**

**Entity Name:** VURSATYLE YOUTH SOLUTIONS, LLC

**Current Principal Place of Business:**

507 DIPLOMAT PKWY E  
CAPE CORAL, FL 33909

**New Principal Place of Business:**

1242 PINE ISLAND RD  
42-285  
CAPE CORAL, FL 33991

**Current Mailing Address:**

PO BOX 152214  
CAPE CORAL, FL 33915 US

**New Mailing Address:**

**FEI Number:** 20-4447472

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EDWARD, ALEXANDRA  
507 DIPLOMAT PKWY E  
CAPE CORAL, FL 33909 US

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

EDWARD, ALEXANDRA  
1242 PINE ISLAND RD  
42-285  
CAPE CORAL, FL 33991 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: ALEXANDRA EDWARD

10/04/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: EDWARD, ALEXANDRA  
Address: 1242 PINE ISLAND RD  
City-St-Zip: CAPE CORAL, FL 33991 US

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: ALEXANDRA EDWARD

MGR

10/04/2010

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