2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000024033

FILED
Nov 18, 2009
Secretary of State

Entity Name: EXPRESS PROFESSIONAL CLEANING LLC

Current Principal Place of Business:

5423 OLIVER ST N
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

P O BOX 65068
ORANGE PARK, FL 32065

New Mailing Address:

5423 OLIVER ST N
JACKSONVILLE, FL 32211

FEI Number: 20-4237135 **FEI Number Applied For ( )** **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:

DEL VALLE, GLADYS
9951 ATLANTIC BLVD
SUITE 314
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

CALDRON, ILEANA C
5423 OLICVER ST N
JACSONVILLE, FL 32211 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: ILEANA CALDERON 11/18/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: CALDERON, ILEANA C
Address: 5423 OLIVER ST N
City-St-Zip: JACKSONVILLE, FL 32211

Title: MGRM ( ) Delete
Name: JIRON, IVANIA
Address: 5423 OLIVER ST N
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ILEANA CALDERON MGR 11/18/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date