

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000029301

FILED
Jun 25, 2008
Secretary of State

Entity Name: ANGEL'S TILE INSTALLER & DESIGN LLC

Current Principal Place of Business:

203 CARDINAL CT.
DAVENPORT, FL 33896

New Principal Place of Business:

1100 SOUTH BEACH CIRCLE
KISSIMMEE, FL 34746

Current Mailing Address:

203 CARDINAL CT.
DAVENPORT, FL 33896

New Mailing Address:

1100 SOUTH BEACH CIRCLE
KISSIMMEE, FL 34746

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:

ORTIZ SANTIAGO, MARIA
2100 POLO CLUB DR
APT 102
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

ORTIZ SANTIAGO, MARIA
1100 SOUTH BEACH CIRCLE
KISSIMMEE, FL 34746 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: MARIA ORTIZ SANTIAGO

06/25/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ORTIZ SANTIAGO, MARIA
Address: 2100 POLO CLUB DR APT 102
City-St-Zip: KISSIMMEE, FL 34741

Title: MGR () Delete
Name: OTERO RAMOS, REINALDO
Address: 2100 POLO CLUB DR APT 102
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ORTIZ SANTIAGO, MARIA
Address: 1100 SOUTH BEACH CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: MGR (X) Change () Addition
Name: OTERO RAMOS, REINALDO
Address: 1100 SOUTH BEACH CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

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: MARIA ORTIZ SANTIAGO

MR

06/25/2008

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