

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000040731

**FILED**  
**Oct 07, 2007**  
**Secretary of State**

**Entity Name:** R & K HOUSEGROOMERS LLC

**Current Principal Place of Business:**

2135 MALLORY CIRCLE  
HAINES CITY, FL 33844

**New Principal Place of Business:**

**Current Mailing Address:**

2135 MALLORY CIRCLE  
HAINES CITY, FL 33844

**New Mailing Address:**

**FEI Number:** 43-2103763      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

REYNARDO-WILLIAMS, KIMBERLY A  
2135 MALLORY CIRCLE  
HAINES CITY, FL 33844      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:** KIMBERLY REYNARDO-WILLIAMS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

**Title:** MGR      ( ) Delete  
**Name:** REYNARDO-WILLIAMS, KIMBERLY A  
**Address:** 2135 MALLORY CIRCLE  
**City-St-Zip:** HAINES CITY, FL 33844

**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:** KIMBERLY REYNARDO-WILLIAMS

MGR

10/07/2007

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