

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000043909

FILED
Nov 06, 2009
Secretary of State

Entity Name: XTREME DANCE STUDIO, LLC

Current Principal Place of Business:

12192 BEACH BLVD.
SUITE 12
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

1728 BROKEN BOW DR W
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 20-4770665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLEGE, TAX & RETIREMENT STRATEGIES, LLC
3110 SPRING GLEN RD.
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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: ROSSELLE A. WALKER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WALKER, ROSSELLE
Address: 1728 BROKEN BOW DR W
City-St-Zip: JACKSONVILLE, FL 32225

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: ROSSELLE A. WALKER

MGRM

11/06/2009

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