

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000051567

FILED
May 05, 2009
Secretary of State

Entity Name: SOFI SOCIAL SERVICES, LLC

Current Principal Place of Business:

1776 NW 166 AVE
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

Current Mailing Address:

1776 NW 166 AVE
PEMBROKE PINES, FL 33028 US

New Mailing Address:

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:

CADET, MIRVA
1776 NW 166 AVE
PEMBROKE PINES FL, FL 33028 US

Name and Address of New Registered Agent:

CADET, MIRVA MGRM
1776 NW 166 AVE
PEMBROKE PINES, FL 33028 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: MIRVA CADET

05/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CADET, MIRVA
Address: 1776 NW 166 AVE
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CADET, MIRVA
Address: 1776 NW 166 AVE
City-St-Zip: PEMBROKE PINES, FL 33028 US

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: MIRVA CADET

MGRM

05/05/2009

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