

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000097681

FILED  
Nov 30, 2007  
Secretary of State

Entity Name: A KIDZ LYTEHOUSE, LLC

**Current Principal Place of Business:**

4606 TUCSON COURT  
VALRICO, FL 33594

**New Principal Place of Business:**

**Current Mailing Address:**

4606 TUCSON COURT  
VALRICO, FL 33594

**New Mailing Address:**

FEI Number: 20-5865993

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GILYARD, SHELTON K JR.  
4606 TUCSON COURT  
VALRICO, FL 33594 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: SHELTON K. GILYARD JR.

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GILYARD, MICHELLE  
Address: 4606 TUCSON COURT  
City-St-Zip: VALRICO, FL 33594

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGR ( ) Change (X) Addition  
Name: COLLINS, JIMMY L III  
Address: 3402 HIGH HAMPTON CIR.  
City-St-Zip: TAMPA, FL 33610

Title: MGR ( ) Change (X) Addition  
Name: BRINKLEY, TONYA  
Address: 4606 TUCSON CT.  
City-St-Zip: VALRICO, FL 33594

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: MICHELLE GILYARD

MGR

11/30/2007

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