

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000000107

FILED
Oct 26, 2007
Secretary of State

Entity Name: EMERSON ST. COIN LAUNDRY LTD. CO.

Current Principal Place of Business:

3617 EMERSON STREET
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

3617 EMERSON STREET
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 26-0641587 **FEI Number Applied For ()** **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:

Name and Address of New Registered Agent:

BUI, HUONG
2136 ALFA ROMEO DRIVE
JACKSONVILLE, FL 32246 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: BUI HUONG

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: BUI, HUONG
Address: 2136 EMERSON STREET
City-St-Zip: JACKSONVILLE, FL 32207

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

Title: MGRM () Delete
Name: BUI, HOAN
Address: 11373 HOLLINGTON CT.
City-St-Zip: JACKSONVILLE, FL 32246

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

Title: MGRM () Delete
Name: NGUYEN, THUY
Address: 11373 HOLLINGTON CT.
City-St-Zip: JACKSONVILLE, FL 32246

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: BUI HUONG

BH

10/26/2007

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