

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000005645

**FILED**  
**Oct 01, 2014**  
**Secretary of State**

**Entity Name:** EMBELLISH HAIR DESIGN, LLC

**Current Principal Place of Business:**

2930 9TH ST N  
SUITE A  
ST. PETERSBURG, FL 33704 US

**New Principal Place of Business:**

**Current Mailing Address:**

2930 9TH STREET NORTH  
A  
ST. PETERSBURG, FL 33704

**New Mailing Address:**

**FEI Number:** 20-8162166

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LORELLO, KATHLEEN C  
2930 9TH STREET NORTH  
A  
SAINT PETERSBURG, FL 33704 US

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

LORELLO, KATHLEEN C OWNER  
2930 9TH STREET NORTH  
A  
SAINT PETERSBURG, FL 33704 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: KATHLEEN C LORELLO

10/01/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: LORELLO, KATHLEEN C  
Address: 2930 UNIT A 9TH ST N  
City-St-Zip: ST. PETERSBURG, FL 33704 US

I hereby 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: KATHLEEN C LORELLO

OWNE

10/01/2014

Electronic Signature of Authorized Person

Date