

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000023070

FILED
May 04, 2009
Secretary of State

Entity Name: SIGNS OF EXCELLENCE, LLC

Current Principal Place of Business:

255 NE 2ND AVENUE
411
DELRAY BEACH, FL 33440

New Principal Place of Business:

534 ENFIELD COURT
DELRAY BEACH, FL 334441760 US

Current Mailing Address:

255 NE 2ND AVENUE
411
DELRAY BEACH, FL 33440

New Mailing Address:

PO BOX 7471
DELRAY BEACH, FL 334827471 US

FEI Number: 87-0796984 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

ERH TAX & FINANCIAL SERVICES, LLC
2669 FOREST HILL BLVD.
104
WEST PALM BEACH, FL 33406 US

Name and Address of New Registered Agent:

GIBSON, DEBORAH W PRES
534 ENFIELD COURT
DELRAY BEACH, FL 334441760 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: DEBORAH WESSON GIBSON

05/04/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: GIBSON, DEBORAH
Address: 255 NE 21ND AVENUE #411
City-St-Zip: DELRAY BEACH, FL 33440 PB

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: GIBSON, DEBORAH W PRES.
Address: 534 ENFIELD COURT
City-St-Zip: DELRAY BEACH, FL 334441760 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: DEBORAH WESSON GIBSON

PRES

05/04/2009

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