

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000026321

**FILED**  
**Feb 20, 2013**  
**Secretary of State**

**Entity Name:** PYRAMIDS SALON "BUILDING HEALTHY HAIR" LLC

**Current Principal Place of Business:**

1254 N PINE HILLS ROAD  
ORLANDO, FL 32808

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 683215  
ORLANDO, FL 32868

**New Mailing Address:**

**FEI Number:** 16-1723204

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIMMONS, CHERYL  
7143 BLAIR DR.  
ORLANDO, FL 32818 US

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

SIMMONS, CHERYL L  
7143 BLAIR DR.  
ORLANDO, FL 32818 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: CHERYL L. SIMMONS

02/20/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SIMMONS, CHERYL L  
Address: 7143 BLAIR DR.  
City-St-Zip: ORLANDO, FL 32818

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 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: CHERYL L. SIMMONS

MRS.

02/20/2013

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