

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000038166

Entity Name: A-FI-MI. L.L.C

**FILED**  
**Oct 04, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

905 SEMINOLE PALMS DRIVE  
GREEN ACRES, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

905 SEMINOLE PALMS DRIVE  
GREEN ACRES, FL 33463

**New Mailing Address:**

FEI Number: 56-2653626

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORRIS, KHALIAH  
905 SEMINOLE PALMS DRIVE  
GREEN ACRES, FL 33463 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: KHALIAH MORRIS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MORRIS, KHALIAH  
Address: 905 SEMINOLE PALMS DRIVE  
City-St-Zip: GREEN ACRES, FL 33463

Title: MGRM  
Name: JOHNSON, MICHELLE  
Address: 7464 NW 34TH STREET  
City-St-Zip: LAUDERHILL, FL 33319

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: KHALIAH MORRIS

MGMT

10/04/2010

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