

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000039026

FILED
Apr 08, 2009
Secretary of State

Entity Name: MARITZA'S BEAUTY SALON & SPA , LLC

Current Principal Place of Business:

2000 NORTH DIXIE HWY
1
LAKE WORTH, FL 33460

New Principal Place of Business:

414 N DIXIE HWY
LANTANA, FL 33462

Current Mailing Address:

1312 TRADEWINDS WAY
LANTANA, FL 33462

New Mailing Address:

414 N DIXIE HWY
LANTANA, FL 33462

FEI Number: 01-0893184 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:

GVS ENTERPRISE SERVICE CORP
834 W LANTANA RD
LANTANA, FL 33462 US

Name and Address of New Registered Agent:

GVS ENTERPRISE SERVICE CORP
3923 LAKE WORTH RD
201
LAKE WORTH, FL 33461 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: ROXANA M VILLALTA

04/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: REYES, MARITZA
Address: 1312 TRADEWINDS WAY
City-St-Zip: LANTANA, FL 33462

Title: MGR () Delete
Name: SILVA, JAIME
Address: 1312 TRADEWINDS WAY
City-St-Zip: LANTANA, FL 33462

ADDITIONS/CHANGES:

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

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: MARITZA REYES

MGR

04/08/2009

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