

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000053392

FILED
Nov 17, 2008
Secretary of State

Entity Name: MAJESTIC KUTZ BARBERSHOP LLC

Current Principal Place of Business:

806 N.E. 5TH STREET
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

Current Mailing Address:

806 N.E. 5TH STREET
CRYSTAL RIVER, FL 34429

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

LAW OFFICE OF SHARON WATSON P.A.
111 WEST MAIN STREET
SUITE #205
INVERNESS, FL 34450 US

Name and Address of New Registered Agent:

BOTTOM LINE BOOKKEEPING & TAX SERVICE
111 WEST MAIN STREET
SUITE #207
INVERNESS, FL 34450 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: R COHEN

11/17/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOPKINS, AL L
Address: 115 N.E. 9TH AVENUE
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES:

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: AL HOPKINS

MBR

11/17/2008

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