

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000092936

FILED
Nov 06, 2008
Secretary of State

Entity Name: ALEX DAY SPA AND SALON OF NAPLES LLC

Current Principal Place of Business:

855 VANDERBILT BEACH ROAD
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

855 VANDERBILT BEACH ROAD
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 26-0903430 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:

TENETOVA, INGA V
910 VANDERBILT BEACH ROAD
APT 414
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

TENETOVA, INGA V
910 VANDERBILT BEACH RD
#414
NAPLES, FL 34108 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: INGA V TENETOVA

11/06/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CUSHMAN, LYUDMILA
Address: 910 VANDERBILT BEACH ROAD, APT 414
City-St-Zip: NAPLES, FL 34108

Title: MGRM () Delete
Name: TENETOVA, INGA V
Address: 910 VANDERBILT BEACH ROAD, APT 414
City-St-Zip: NAPLES, FL 34108

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: INGA V TENETOVA

MGRM

11/06/2008

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