

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000112359

**FILED**  
**Jan 03, 2012**  
**Secretary of State**

**Entity Name:** SAINT MICHAEL ARCHANGEL, LLC

**Current Principal Place of Business:**

1652 NORTH TAMiami TRIAL  
NORTH FORT MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2913  
FORT MYERS, FL 33902

**New Mailing Address:**

**FEI Number:** 51-0655447

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PACHECO, MIRIAM  
3093 CLEVELAND AVE.  
FORT MYERS, FL 33901 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: MIRIAM PACHECO

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PACHECO, MIRIAM  
Address: P.O. BOX 2913  
City-St-Zip: FORT MYERS, FL 33902

Title: MGRM  
Name: TORRES, MARIA T  
Address: P.O. BOX 2913  
City-St-Zip: FORT MYERS, FL 33902

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: MIRIAM PACHECO

PRE

01/03/2012

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