

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000115679

**FILED**  
**Mar 01, 2010**  
**Secretary of State**

**Entity Name:** POSHE DAY SALON, LLC

**Current Principal Place of Business:**

2365 U.S. 27 S.  
UNIT 5  
SEBRING, FL 33870 US

**New Principal Place of Business:**

**Current Mailing Address:**

2365 U.S. 27 S.  
UNIT 5  
SEBRING, FL 33870 US

**New Mailing Address:**

**FEI Number:** 26-1460400      **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:**

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

DIANE, STAHL  
328 SPORTSMAN AVE.  
SEBRING, FL 33875 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: DIANE STAHL

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** DIANE, STAHL  
**Address:** 328 SPORTSMAN AVE.  
**City-St-Zip:** SEBRING, FL 33875 US

**Title:** MGRM  
**Name:** DENNIS, STAHL  
**Address:** 328 SPORTSMAN AVE.  
**City-St-Zip:** SEBRING, FL 33875 US

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: DIANE STAHL

MGRM

03/01/2010

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