2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Mar 17, 2009
Secretary of State

DOCUMENT# L07000116613

Entity Name: KANGAROO SERVICES LLC

Current Principal Place of Business:

104TH AVE N
608 A
NAPLES, FL 34108 C

New Principal Place of Business:

26586 SOUTHERN PINES DR
I-4
NAPLES, FL 34135 C

Current Mailing Address:

26586 SOUTHERN PINES DR
I-4
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 26-1345300 **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:

MAQUEZ, ALL T
26586 SOUTHERN PINES DR
I-4
BONITA SPRINGS, FL 34135 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: ALL MARQUEZ

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: RUSSEK, DOLORES
Address: 104TH AVE NORTH
City-St-Zip: NAPLES, FL 34108

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: RUSSEK, DOLORES
Address: 26586 SOUTHERN PINES DR APT #I-4
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SECR ( ) Change (X) Addition
Name: MAQUEZ, ALL
Address: 26586 SOUTHERN PINES DR APT #I-4
City-St-Zip: BONITA SPRINGS, FL 34135

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: DOLORES RUSSEK MGRM 03/17/2009

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