

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000118967

Entity Name: BUTTERFLY NAILS LLC

FILED
Oct 17, 2009
Secretary of State

Current Principal Place of Business:

16335 SW 88 ST
MIAMI, FL 33193

New Principal Place of Business:

16335 SW 88 ST
MIAMI, FL 33196

Current Mailing Address:

16335 SW 88 ST
MIAMI, FL 33193

New Mailing Address:

16335 SW 88 ST
MIAMI, FL 33196

FEI Number: 26-1482970 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:

ALCOBA, AWILDA
16335 SW 88 ST
MIAMI, FL 33193 US

Name and Address of New Registered Agent:

ALCOBA, BRUNILDA
16335 SW 88 ST
MIAMI, FL 33196 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: VANESSA ECKARDT

10/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MRS () Delete
Name: ALCOPA, AWILDA
Address: 16335 SW 88 ST
City-St-Zip: MIAMI, FL 33193

Title: MRS () Delete
Name: ECKARDT, VANESSA M
Address: 16335 SW 88 ST
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES:

Title: MRS (X) Change () Addition
Name: ALCOPA, BRUNILDA
Address: 16335 SW 88 ST
City-St-Zip: MIAMI, FL 33196

Title: MRS (X) Change () Addition
Name: ECKARDT, VANESSA M
Address: 16335 SW 88 ST
City-St-Zip: MIAMI, FL 33196

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: VANESSA ECKARDT

MGR

10/17/2009

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