

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000013464

**FILED**  
**Nov 09, 2010**  
**Secretary of State**

**Entity Name:** CREATIVITOWN DAYCARE CENTER LLC

**Current Principal Place of Business:**

2000 FALCON TRACE BLVD  
SUITE 100  
ORLANDO, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

2000 FALCON TRACE BLVD  
SUITE 100  
ORLANDO, FL 32837 US

**New Mailing Address:**

**FEI Number:** 26-2618135

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LARREA, RUBEN  
2000 FALCON TRACE BLVD  
SUITE 100  
ORLANDO, FL 32837 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:** RUBEN LARREA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** LARREA, RUBEN  
**Address:** 2000 FALCON TRACE BLVD  
**City-St-Zip:** ORLANDO, FL 3283 US

**Title:** MGR  
**Name:** GOMEZ, JOSE V  
**Address:** 396 ALHAMBRA CIRCLE, SUITE 100  
**City-St-Zip:** CORAL GABLES, FL 33145 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:** RUBEN LARREA

MGR

11/09/2010

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