

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000035628

**FILED**  
**Feb 10, 2010**  
**Secretary of State**

**Entity Name:** TROPICAL DREAM BOUQUET LLC

**Current Principal Place of Business:**

901 HILLCREST DRIVE  
408  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

901 HILLCREST DRIVE  
408  
HOLLYWOOD, FL 33021

**New Mailing Address:**

**FEI Number:** 26-2359312      **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:**

ODULIO, MARIE C  
901 HILLCREST DRIVE  
408  
HOLLYWOOD, FL 33021 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: MARIE ODULIO

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** ODULIO, MARIE C  
**Address:** 901 HILLCREST DRIVE #408  
**City-St-Zip:** HOLLYWOOD, FL 33021

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: MARIE ODULIO

MGR

02/10/2010

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