

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000059408

Entity Name: POWERCARE, LLC

**FILED**  
**Nov 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

19586 BLACK OLIVE LANE  
BOCA RATON, FL 33498

**New Principal Place of Business:**

**Current Mailing Address:**

19586 BLACK OLIVE LANE  
BOCA RATON, FL 33498

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

BARRIOS, MARIANA C  
19586 BLACK OLIVE LN  
BOCA RATON, FL 33498 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: MARIANA BARRIOS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BARRIOS, LUIS J  
Address: 17107 AVENUE LE RIVAGE  
City-St-Zip: BOCA RATON, FL 33496

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: MARIANA BARRIOS

MGR

11/08/2011

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