

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000066573

**FILED**  
**Oct 17, 2011**  
**Secretary of State**

**Entity Name:** SPLISH-N-SPLASH MOBILE PET SPA, L.L.C.

**Current Principal Place of Business:**

6619 SOUTH DIXIE HIGHWAY, #156  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

6619 SOUTH DIXIE HIGHWAY, #156  
MIAMI, FL 33143

**New Mailing Address:**

**FEI Number:** 26-3098865

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CALVIN, VICTORIA  
6619 SOUTH DIXIE HIGHWAY, #156  
MIAMI, FL 33143 US

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

SMITH, VICTORIA  
6619 SOUTH DIXIE HIGHWAY, #156  
MIAMI, FL 33143 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: VICTORIA SMITH

10/17/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: SMITH, VICTORIA  
Address: 6619 SOUTH DIXIE HIGHWAY, #156  
City-St-Zip: MIAMI, FL 33143

Title: VP  
Name: SMITH, JEFFREY  
Address: 6619 SOUTH DIXIE HIGHWAY, #156  
City-St-Zip: MIAMI, FL 33143

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: VICTORIA SMITH

P

10/17/2011

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