

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000075225

**FILED**  
**Jan 21, 2010**  
**Secretary of State**

**Entity Name:** MIRELLA'S ASSISTED LIVING LLC

**Current Principal Place of Business:**

3003 WEST BEACH STREET  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

3003 WEST BEACH STREET  
TAMPA, FL 33607

**New Mailing Address:**

FEI Number: 26-3113120      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:**

RUBIO, MIRELLA R  
3003 WEST BEACH STREET  
TAMPA, FL 33607      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: MIRELLA R RUBIO

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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: RUBIO, MIRELLA R  
Address: 3003 WEST BEACH STREET  
City-St-Zip: TAMPA, FL 33607

Title: MGR  
Name: MARQUEZ, ROBERT  
Address: 3003 WEST BEACH STREET  
City-St-Zip: TAMPA, FL 33607

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: MIRELLA R RUBIO

MNGR

01/21/2010

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