

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000093504

**FILED**  
**Apr 08, 2010**  
**Secretary of State**

**Entity Name:** GRAPHIC + FASHION, LLC

**Current Principal Place of Business:**

55 NE 5TH AVENUE, STE. 501  
BOCA RATON, FL 33432

**New Principal Place of Business:**

617 NE ROSSETTI LANE  
BOCA RATON, FL 33487

**Current Mailing Address:**

55 NE 5TH AVENUE, STE. 501  
BOCA RATON, FL 33432

**New Mailing Address:**

617 NE ROSSETTI LANE  
BOCA RATON, FL 33487

**FEI Number:** 26-3475747      **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:**

TRONCONE, MONIQUE CPA  
55 NE 5TH AVENUE, STE. 501  
BOCA RATON, FL 33432      US

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

RODRIGUEZ, MARCELA  
617 NE ROSSETTI LANE  
BOCA RATON, FL 33487      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: MARCELA RODRIGUEZ

04/08/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: RODRIGUEZ, MARCELA  
Address: 6463 LA COSTA DR #601  
City-St-Zip: BOCA RATON, FL 33433

Title: MGR  
Name: CAPRILES, ANDREINA I  
Address: 617 NE ROSSETTI LANE  
City-St-Zip: BOCA RATON, FL 33487

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: MARCELA RODRIGUEZ

MGRM

04/08/2010

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