2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000096434

Entity Name: ROCK CITY BARBER SHOP LLC

FILED Nov 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3601 CINNAMON FERN LOOP 16215 STATE RD. 50 CLERMONT, FL 34714

SUITE 104B

CLERMONT, FL 34711

Current Mailing Address: New Mailing Address:

3601 CINNAMON FERN LOOP 16215 STATE RD. 50

SUITE 104B CLERMONT, FL 34714

CLERMONT, FL 34711

FEI Number: 37-1574419 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:

EDMEADE, KEVIN A EDMEADE, KEVIN A 16215 STATE RD. 50 3601 CINNÁMON FERN LOOP CLERMONT, FL 34714 SUITE 104B

CLERMONT, FL 34711 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: KEVIN EDMEADE 11/23/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change () Addition EDMEADE, KEVIN A **ROCK CITY BARBER SHOP** Name: Name: Address: 3601 CINNAMON FERN LOOP Address: 16215 STATE RD. 50 SUITE 104B

City-St-Zip: CLERMONT, FL 34714 City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: KEVIN EDMEADE **MGRM** 11/23/2009