

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000115357

**FILED**  
**Oct 02, 2009**  
**Secretary of State**

**Entity Name:** THE LEARNING ANGELS DAYCARE LLC

**Current Principal Place of Business:**

317 N.W. 4TH STREET  
JASPER, FL 32052 US

**New Principal Place of Business:**

**Current Mailing Address:**

317 N.W. 4TH STREET  
JASPER, FL 32052 US

**New Mailing Address:**

**FEI Number:** 94-3460196

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARSHALL, JEREMY  
338 NW BROWN RD.  
LAKE CITY, FL 32055 US

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

MARSHALL, JEREMY MGR  
338 NW BROWN RD.  
LAKE CITY, FL 32055 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: JEREMY MARSHALL

10/02/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MARSHALL, JEREMY  
Address: 338 NW BROWN RD.  
City-St-Zip: LAKE CITY, FL 32055

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JEREMY MARSHALL

MGR

10/02/2009

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