

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000026141

**FILED**  
**Jan 30, 2012**  
**Secretary of State**

**Entity Name:** RUBY ROSE BEAUTY USA LLC

**Current Principal Place of Business:**

4332 N145TH AVE  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

4332 NORTH 145TH AVE  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

**FEI Number:** 26-4477592

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MANOU, JEAN C  
4332 N 145TH AVE  
LOXAHATCHEE, FL 33470 US

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

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:** JEAN-CLAUDE MANOU

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** MANOU, JEAN C  
**Address:** 4332 N 145TH AVE  
**City-St-Zip:** LOXAHATCHEE, FL 33470

**Title:** MGRM  
**Name:** MANOU, ISABELLE  
**Address:** 4332 N 145TH AVE  
**City-St-Zip:** LOXAHATCHEE, FL 33470

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:** JEAN-CLAUDE MANOU

MGR

01/30/2012

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