

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000057495

**Entity Name:** ORLANDO POWER YOGA, LLC

**FILED**  
**Oct 22, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

2415 EAST SOUTH STREET  
ORLANDO, FL 32803

**New Principal Place of Business:**

**Current Mailing Address:**

6143 SAND PINES ESTATES BLVD  
ORLANDO, FL 32819

**New Mailing Address:**

**FEI Number:** 27-0393297

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THORPE'S CONSULTING SYSTEMS INC  
6327 PINEY GLEN LANE  
ORLANDO, FL 32819 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:** LYSANDER THORPE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM

**Name:** SENN, KELLY A

**Address:** 6143 SAND PINES ESTATES BLVD

**City-St-Zip:** ORLANDO, FL 32819 US

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:** KELLY SENN

MGRM

10/22/2013

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