

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000070466

**FILED**  
**Jul 09, 2012**  
**Secretary of State**

**Entity Name:** LACHAPELLE CLEANING, LLC

**Current Principal Place of Business:**

48 BEECHWOOD DRIVE  
CRAWFORDVILLE, FL 32327 US

**New Principal Place of Business:**

145 BEECHWOOD DRIVE  
CRAWFORDVILLE, FL 32327 US

**Current Mailing Address:**

48 BEECHWOOD DRIVE  
CRAWFORDVILLE, FL 32327 US

**New Mailing Address:**

145 BEECHWOOD DRIVE  
CRAWFORDVILLE, FL 32327 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

LACHAPELLE, AMANDA  
48 BEECHWOOD DRIVE  
CRAWFORDVILLE, FL 32327 US

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

SMITH, AMANDA E  
145 BEECHWOOD DRIVE  
CRAWFORDVILLE, FL 32327 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: AMANDA SMITH

07/09/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SMITH, AMANDA E  
Address: 145 BEECHWOOD DRIVE  
City-St-Zip: CRAWFORDVILLE, FL 32327 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: AMANDA SMITH

MGRM

07/09/2012

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