

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000121253

Entity Name: SACRESE LLC

**FILED**  
**Oct 23, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5633 PADDOCK TRAIL DRIVE  
TAMPA, FL 33624

**New Principal Place of Business:**

5107 LETITIA CT  
TAMPA, FL 33624

**Current Mailing Address:**

5633 PADDOCK TRAIL DRIVE  
TAMPA, FL 33624

**New Mailing Address:**

P.O. BOX 15186  
TAMPA, FL 33684

FEI Number: 27-1562980

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANTA CRUZ, JAIME  
5633 PADDOCK TRAIL DRIVE  
TAMPA, FL 33624 US

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

SANTA CRUZ, JAIME E  
5107 LETITIA CT  
TAMPA, FL 33684 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: JAIME E SANTA CRUZ

10/23/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SANTA CRUZ, JAIME E  
Address: 5107 LETITIA CT  
City-St-Zip: TAMPA, FL 33624

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: JAIME E SANTA CRUZ

MGR

10/23/2011

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