

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000015610

**Entity Name:** THE FLUFFY PLACE LLC

**FILED**  
**Apr 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9516 TREETOPS LAKE ROAD  
TAMPA, FL 33626

**New Principal Place of Business:**

**Current Mailing Address:**

9516 TREETOPS LAKE ROAD  
TAMPA, FL 33626

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

PERSAUD, NEILA  
9516 TREETOPS LK RD  
TAMPA, FL 33626 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: NEILA PERSAUD

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PERSAUD, NEILA  
Address: 9516 TREETOPS LK RD  
City-St-Zip: TAMPA, FL 33626

Title: MGRM  
Name: POSEY, M  
Address: 9622 W LINEBAUGH AVE  
City-St-Zip: TAMPA, FL 33626

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: NEILA PERSAUD

MGRM

04/02/2012

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