

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000051200

**Entity Name:** MYAMMEE'S HAIR SPA , LLC

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

**Current Principal Place of Business:**

16507 NE 6TH AVE.  
NORTH MIAMI, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 540962  
OPA LOCKA, FL 33054

**New Mailing Address:**

16507 NE 6TH AVE.  
NORTH MIAMI, FL 33162

**FEI Number:** 27-2516843

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PITTS, ANGELA  
16509 NE 6TH AVE.  
NORTH MIAMI, FL 33162 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: ANGELA PITTS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MS.  
Name: PITTS, ANGELA  
Address: 16509 NE 6TH AVE  
City-St-Zip: MIAMI, FL 33162

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: ANGELA PITTS

MS.

10/09/2012

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