

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000098010

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

**Entity Name:** KAJMIR HAIR LLC

**Current Principal Place of Business:**

250 N.W. 109TH AVENUE  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

250 N.W. 109TH AVENUE  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: NATALIA UTRERA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ZAMAN, ANSARI  
Address: 250 N.W. 109TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGR  
Name: CASTILLO, GEORGE  
Address: 250 N.W. 109TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: S  
Name: ZAMAN, ANSARI  
Address: 250 N.W. 109TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: T  
Name: CASTILLO, GEORGE  
Address: 250 N.W. 109TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

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: ANSARI ZAMAN

MGRS

04/02/2012

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