

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000033542

**Entity Name:** A TOUCH OF ALOHA LLC.

**FILED**  
**Dec 03, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

1568 BOSWELL ST.  
NORTH PORT, FL 34288

**New Principal Place of Business:**

2107 FIESTA DR  
SARASOTA, FL 34231

**Current Mailing Address:**

1568 BOSWELL ST.  
NORTH PORT, FL 34288

**New Mailing Address:**

2107 FIESTA DR  
SARASOTA, FL 34231

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

BARNES, ROBYN  
1568 BOSWELL ST.  
NORTH PORT, FL 34288 US

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

BARNES, ROBERT  
2107 FIESTA DR  
SARASOTA, FL 34231 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: ROBERT BARNES

12/03/2013

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BARNES, ROBERT E  
Address: 2107 FIESTA DR  
City-St-Zip: SARASOTA, FL 34231

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: ROBERT BARNES

MGR

12/03/2013

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