

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000120518

**FILED**  
**Sep 15, 2014**  
**Secretary of State**

**Entity Name:** NAPLES MAID SERVICE LLC

**Current Principal Place of Business:**

4833 KESWICK WAY  
NAPLES, FL 34105

**New Principal Place of Business:**

**Current Mailing Address:**

4833 KESWICK WAY  
NAPLES, FL 34105

**New Mailing Address:**

**FEI Number:** 30-0703103

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MELLEY, SIMON  
4833 KESWICK WAY  
NAPLES, FL 34105 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:** SIMON MELLEY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**AUTHORIZED PERSONS:**

**Title:** MGRM  
**Name:** MELLEY, SIMON  
**Address:** 4833 KESWICK WAY  
**City-St-Zip:** NAPLES, FL 34105

**Title:** MGRM  
**Name:** MELLEY, GILLIAN  
**Address:** 4833 KESWICK WAY  
**City-St-Zip:** NAPLES, FL 34105

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

**SIGNATURE:** SIMON MELLEY

MGR

09/15/2014

\_\_\_\_\_  
Electronic Signature of Authorized Person

\_\_\_\_\_  
Date