

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000108711

**FILED**  
**Dec 04, 2014**  
**Secretary of State**

**Entity Name:** SOPHIA ACCESSORIES LLC

**Current Principal Place of Business:**

820 CORAL RIDGE DR  
APT 103  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

583 LAKEVIEW DR  
APT 583  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

820 CORAL RIDGE DR  
APT 103  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

583 LAKEVIEW DR  
APT 583  
CORAL SPRINGS, FL 33071

**FEI Number:** 38-3912972

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AVILA, CLAUDIA  
820 CORAL RIDGE DR  
APT 103  
CORAL SPRINGS, FL 33071 US

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

AVILA, CLAUDIA  
583 LAKEVIEW DR  
APT 583  
CORAL SPRINGS, FL 33071 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: CLAUDIA AVILA

12/04/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: AVILA, CLAUDIA  
Address: 583 LAKEVIEW DR  
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: MGR  
Name: PELAEZ, JOHANS  
Address: 583 LAKEVIEW DR  
City-St-Zip: CORAL SPRINGS, FL 33071 US

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: CLAUDIA AVILA

MGR

12/04/2014

Electronic Signature of Authorized Person

Date