

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000135931

**FILED**  
**Oct 05, 2014**  
**Secretary of State**

**Entity Name:** CASIMIR MODERN CUTZ AND STYLZ LLC

**Current Principal Place of Business:**

2424 NORTH CONGRESS AVENUE  
SUITE H  
WEST PALM BEACH, FL 33409 US

**New Principal Place of Business:**

**Current Mailing Address:**

2424 NORTH CONGRESS AVENUE  
SUITE H  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

**FEI Number:** 46-3751395

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CASIMIR, SEAN JUNIOR  
2424 NORTH CONGRESS AVENUE  
SUITE H  
WEST PALM BEACH, FL 33409 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:** SEAN JUNIOR CASIMIR

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

**Title:** MGR  
**Name:** CASIMIR, SEAN JUNIOR  
**Address:** 2424 NORTH CONGRESS AVE, SUITE H  
**City-St-Zip:** WEST PALM BEACH, FL 33409 US

**Title:** MGR  
**Name:** CASIMIR, MARIE DORA  
**Address:** 2424 NORTH CONGRESS AVE, SUITE H  
**City-St-Zip:** WEST PALM BEACH, FL 33409 US

**Title:** MGR  
**Name:** JEAN-CHARLES, MARIE DORA  
**Address:** 2424 NORTH CONGRES, SUITE H  
**City-St-Zip:** WEST PALM BEACH, FL 33409 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:** SEAN JUNIOR CASIMIR

MR

10/05/2014

Electronic Signature of Authorized Person

Date