

**2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000028850

**Entity Name:** JULIE'S AFRICAN HAIR BRAIDING LLC**Current Principal Place of Business:**10416N.FLORIDA AVENUE  
TAMPA,, FL 33612**Current Mailing Address:**10416N.FLORIDA AVENUE  
TAMPA, FL 33612 US**FEI Number:** 82-4666381**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**YODJEU, JULIE C  
11324AUTUMN COURT  
C  
TAMPA,, FL 33612 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:** JULIE YODJEU**09/28/2020**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**Title MGR  
Name YODJEU, JULIE C  
Address 10416N FLORIDA AVENUE  
City-State-Zip: TAMPA FL 33612Title MGR  
Name YODJEU, JULIE C  
Address 10416N FLORIDA  
City-State-Zip: TAMPA FL 33612Title MGR  
Name YODJEU, JULIE  
Address 10416N FLORIDA  
City-State-Zip: TAMPA FL 33612Title MGR  
Name YODJEU, JULIE C  
Address 10416N FLORIDA  
City-State-Zip: TAMPA FL 33612Title MGR  
Name YODJEU, JULIE  
Address 10416N FLORIDA  
City-State-Zip: TAMPA FL 33612Title MGR  
Name YODJEU, JULIE  
Address 10416N FLORIDA  
City-State-Zip: TAMPA FL 33612

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JULIE YODJEU**09/28/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date