

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Sep 30, 2008  
Secretary of State**

DOCUMENT# L01000004239

Entity Name: MATTHEW PATRICK LC

**Current Principal Place of Business:**

C/O MATTHEW DEMIKE  
5419 LAKE HOWELL RD  
WINTER PARK, FL 32792 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MATTHEW DEMIKE  
5419 LAKE HOWELL RD  
WINTER PARK, FL 32792

**New Mailing Address:**

FEI Number: 59-3702260      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DEMIKE, MATTHEW  
5419 LAKE HOWELL RD  
WINTER PARK, FL 32792 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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DEMIKE, MATTHEW  
Address: 5419 LAKE HOWELL ROAD  
City-St-Zip: WINTER PARK, FL 32792

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: MCCUNE, LEROY  
Address: 53 HILLSBORO DR  
City-St-Zip: ORCHARD PARK, NY 14127

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: MATTHEW DEMIKE      MGRM      09/30/2008

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