2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000049709 1. Entity Name ARROW PAINTING LLC						Q5 <u>J</u>	FILE NUG 30 AM	D	
Principal Plac 1513 BRANC TALLAHASSE	CH ST		Mailing Address 1513 BRANCH ST TALLAHASSEE, FL 32303			SECRETARY OF STATES FALLAHASSEE, FLORIDAA			
2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			08302005	Chg-LLC	CR2E083 (10/0	3)
City & State			City & State			4. FEI Numb 20-044			Applied For Not Applicable
Zip	Country		Zip	Countr		5. Certificate of Status Desired \$5.00 Additional Fee Required			
	6. Name	and Address of Current I	Registered Agent		Name	7. Name and	d Address of New R	egistered Agent	
BARNES 8 2629 BLAI TALLAHAS	R STONÉ	RD.	Street Address (I		P.O. Box Numb	per is Not Acceptable	÷)		
			City				FL Zip C	ode	
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE									
	ing Fee i: by Septen	s \$50.00 nber 7, 2005						e check payable to Department of St	
9.		MANAGING MEMBEI	RS/MANAGERS 10.				ADDITIONS/	CHANGES	
NAME STREET ADDRESS CITY-ST-ZIP	MGRM DODRILL 1513 BRA TALLAHA		Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP		TE EET ADDRESS	4 09/0	00059: 07/050103:	Chang 3 95394 3003 **51	e □ Addition -). ((()
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					E SET ADDRESS '-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		☐ Delete	TITLI NAM STRE	E			☐ Change	Addition
11. I he by certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 8/30/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER, OR AUTHORIZED REPRESENTATIVE Date Dayling Phone #									