

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075943

**FILED
Mar 03, 2008
Secretary of State**

Entity Name: SHADOWOLF INVESTIGATIONS, LLC

Current Principal Place of Business:

5490 SE 146TH LANE
SUMMERFIELD, FL 34491

New Principal Place of Business:

Current Mailing Address:

5490 SE 146TH LANE
SUMMERFIELD, FL 34491

New Mailing Address:

FEI Number: 20-3262327 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LEVY-AGUADO, ILENE R
5490 SE 146TH LANE
SUMMERFIELD, FL 34491 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: PRES () Delete
Name: LEVY, ILENE R
Address: 5490 SE 146TH LANE
City-St-Zip: SUMMERFIELD, FL 34491 US

ADDITIONS/CHANGES:

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

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: ILENE R LEVY-AGUADO PRES 03/03/2008

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