

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000097555

FILED
Feb 25, 2009
Secretary of State

Entity Name: EH2, LLC

Current Principal Place of Business:

27 BLUEBERRY DRIVE
MENDON, MA 01756

New Principal Place of Business:

Current Mailing Address:

27 BLUEBERRY DRIVE
MENDON, MA 01756

New Mailing Address:

FEI Number: 20-3606162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMPERT, MICHAEL A ESQ.
1655 PALM BEACH LAKES BLVD.
SUITE 900
WEST PALM BEACH, FL 33401 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: ELORDI, JON P
Address: 27 BLUEBERRY DRIVE
City-St-Zip: MENDON, MA 01756 US

Title: MGRM () Delete
Name: ELORDI, KAREN S
Address: 27 BLUEBERRY DRIVE
City-St-Zip: MENDON, MA 01756 US

ADDITIONS/CHANGES:

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

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: KAREN S. ELORDI

MGRM

02/25/2009

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