

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 30, 2009  
Secretary of State**

DOCUMENT# L06000015948

Entity Name: BLAZIN ICE LLC

**Current Principal Place of Business:**

195 WEKIVA SPRINGS RD.  
SUITE 330  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 917297  
LONGWOOD, FL 32791

**New Mailing Address:**

FEI Number: 20-4317750      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GROSS, ANDREW L  
195 WEKIVA SPRINGS RD.  
SUITE 330  
LONGWOOD, FL 32779 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: MGR      ( ) Delete  
Name: GROSS, ANDREW L  
Address: PO BOX 917297  
City-St-Zip: LONGWOOD, FL 32791

Title: MGR      ( ) Delete  
Name: PATEL, HEMAL  
Address: 2253 SHAKER RUN ROAD  
City-St-Zip: LEXINGTON, KY 40509

**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: ANDREW L GROSS

MGR

04/30/2009

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