2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000067037

Entity Name: AN OUTSIDE EYE LLC

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1439 RUSSELL AVE SARASOTA, FL 34232 US

Current Mailing Address: New Mailing Address:

1439 RUSSELL AVE SARASOTA, FL 34232 US

FEI Number: 26-0524915 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301 US

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

3 3 3

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 ROBINSON, AARON T
 Name:

 Address:
 1439 RUSSELL AVE
 Address:

 City-St-Zip:
 SARASOTA, FL 34232 US
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition
Name: FLOWERS, DUSTIN Name: CAPORASO, ANTHONY MGRM

Address: 1104 SOUTH MISSOURI AVE #301 Address: 735 SOUTH LOCKWOOD RIDGE RD City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip: SARASOTA, FL 34237

Title: MGRM (X) Delete Title: () Change () Addition

Name: WEISER, BILL Name:
Address: 2749 FEIFFER CIRCLE Address:
City-St-Zip: SARASOTA, FL 34235 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: AARON ROBINSON MGRM 04/08/2009