2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
May 11, 2009
Secretary of State

DOCUMENT# L07000104220

Entity Name: ARTISTRY CONCEPTS, LLC

Current Principal Place of Business:

3579 SOUTH ACCESS ROAD
SUITE J
ENGLEWOOD, FL 34224 US

New Principal Place of Business:

Current Mailing Address:

3579 SOUTH ACCESS ROAD
SUITE J
ENGLEWOOD, FL 34224 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARTVIGSEN, GALE
125 ARROW LANE
CAPE HAZE, FL 33947 US

Name and Address of New Registered Agent:

WESTON, MARK A
125 ARROW LANE
CAPE HAZE, FL 33947 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: MARK A. WESTON 05/11/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HARTVIGSEN, GALE
Address: 125 ARROW LANE
City-St-Zip: CAPE HAZE, FL 33947 US

Title: MGRM (X) Delete
Name: HARTVIGSEN, GALE
Address: 125 ARROW LANE
City-St-Zip: CAPE HAZE, FL 33947 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: WESTON, MARK A
Address: 125 ARROW LANE
City-St-Zip: CAPE HAZE, FL 33947 US

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: MARK A. WESTON MGR 05/11/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date