

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000095376

FILED
Jun 30, 2009
Secretary of State

Entity Name: PRISTINE EXTERIOR CLEANING LLC

Current Principal Place of Business:

4379 BROAD ST
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

4379 BROAD ST
BROOKSVILLE, FL 34601

New Mailing Address:

FEI Number: 26-3508618 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

VON PRESSENTIN, SHAWN
4379 BROAD ST
BROOKSVILLE, FL 34601 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VON PRESSENTIN, SHAWN
Address: 4379 BROAD ST
City-St-Zip: BROOKSVILLE, FL 34601

Title: MGR () Delete
Name: VON PRESSENTIN, HEATHER
Address: 4379 BROAD ST
City-St-Zip: BROOKSVILLE, FL 34601

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGR () Change (X) Addition
Name: KELVIN, KINSER
Address: 4379 BROAD ST
City-St-Zip: BROOKSVILLE, FL 34601

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: SHAWN VON PRESSENTIN

MGR

06/30/2009

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