

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000007168

**FILED**  
**Jan 26, 2012**  
**Secretary of State**

**Entity Name:** TILE ARTISANS DIGITAL IMAGING, LLC

**Current Principal Place of Business:**

26211 W US HIGHWAY 27  
HIGH SPRINGS, FL 32643 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 786  
HIGH SPRINGS, FL 32655 US

**New Mailing Address:**

**FEI Number:** 27-4576093

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TYPINSKI, DAVID A  
26211 W US HIGHWAY 27  
HIGH SPRINGS, FL 32643 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  
**Name:** TYPINSKI, DAVID A  
**Address:** 26211 US HIGHWAY 27  
**City-St-Zip:** HIGH SPRINGS, FL 32643 US

**Title:** MGRM  
**Name:** GOULD, JO ANN  
**Address:** 8264 SPYGLASS DR.  
**City-St-Zip:** WEST PALM BEACH, FL 33412 US

I hereby 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:** DAVID A TYPINSKI

MGRM

01/26/2012

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