


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000052888 1. Entity Name ARTISAN'S STUDIO & DESIGN, L.L.C.	
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Principal Place of Business 5760 SHIRLEY STREET STUDIO #15 NAPLES, FL 34109	Mailing Address 853 VANDERBILT BEACH RD #212 NAPLES, FL 34109
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04242008 No Chg-LLC

CR2E083 (12/07)

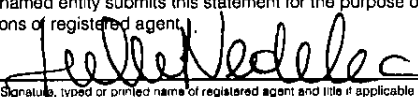
DO NOT WRITE IN THIS SPACE

4. FEI Number 75-3218911	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent NEDELEC, JULIE M 853 VANDEBILT BEACH RD. #212 NAPLES, FL 34109
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DO NOT WRITE IN THIS SPACE

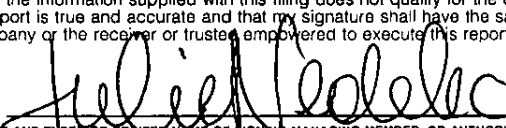
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE <u>4/24/08</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000936519
05/27/08-80013-018 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NEDELEC, JULIE 853 VANDERBILT BEACH RD #212, FL 34109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	N/A
TITLE NAME STREET ADDRESS CITY-ST-ZIP	N/A
TITLE NAME STREET ADDRESS CITY-ST-ZIP	N/A
TITLE NAME STREET ADDRESS CITY-ST-ZIP	N/A
TITLE NAME STREET ADDRESS CITY-ST-ZIP	N/A

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	DATE <u>4/24/08</u> 239-537-4607 <small>Date Daytime Phone #</small>