2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# L03000035806

Entity Name: 24/7 DRYING, LLC

Current Principal Place of Business:

51 GILES AVENUE #12
NORTH HAVEN, CT 06473

New Principal Place of Business:

Current Mailing Address:

51 GILES AVENUE
UNIT #12
NORTH HAVEN, CT 06473

New Mailing Address:

FEI Number: 61-1458359 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ZICHICHI, JOSEPH P
1103 NW 58TH TERRACE
UNIT 114
SUNRISE, FL 33313 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: MR ( ) Delete
Name: ZICHICHI, JOSEPH P
Address: 5 SLEEPY HOLLOW LANE
City-St-Zip: GUILFORD, CT 06437

Title: MR ( ) Delete
Name: PUGLISI, PAUL J
Address: 460 FOUNTAIN STREET
City-St-Zip: NEW HAVEN, CT 06515

ADDITIONS/CHANGES:

Title: MR (X) Change ( ) Addition
Name: ZICHICHI, JOSEPH P
Address: 45 WOODHOUSE AVENUE
City-St-Zip: NORTHFORD, CT 06472

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: JOSEPH P. ZICHICHI MR 01/16/2009

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