

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000014673

**FILED**  
**Feb 05, 2009**  
**Secretary of State**

**Entity Name:** THE SEJPAL LAW FIRM, LLC

**Current Principal Place of Business:**

306 LAKE KELL CT  
LUTZ, FL 33549 US

**New Principal Place of Business:**

2024 W. CLEVELAND ST  
TAMPA, FL 33606 US

**Current Mailing Address:**

306 LAKE KELL CT  
LUTZ, FL 33549 US

**New Mailing Address:**

P.O. BOX 205  
LUTZ, FL 33548 US

**FEI Number:** 26-2334887

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEJPAL, KUNAL M  
306 LAKE KELL CT  
LUTZ, FL 33549 US

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

SEJPAL, KUNAL M  
2024 W. CLEVELAND ST  
TAMPA, FL 33606 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: KUNAL M. SEJPAL

02/05/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SEJPAL, KUNAL M  
Address: 306 LAKE KELL CT  
City-St-Zip: LUTZ, FL 33549 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SEJPAL, KUNAL M  
Address: P.O. BOX 205  
City-St-Zip: LUTZ, FL 33548 US

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: KUNAL M. SEJPAL

MGRM

02/05/2009

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