

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020550

FILED
Mar 31, 2009
Secretary of State

Entity Name: CROWN LINEN, LLC

Current Principal Place of Business:

3235 NW 62ND ST
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

3235 NW 62ND ST
MIAMI, FL 33147

New Mailing Address:

FEI Number: 20-0036473

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELAND, RUSSIN, & BUDWICK, P.A.
3000 WACHOVIA FINACIAL CENTER
200 SOUTH BISCAYNE BLVD
MIAMI, FL 33131 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: MGR () Delete
Name: GLIKSBERG, JACQUES
Address: 400 SKOKIE BLVD. SUITE 265
City-St-Zip: NORTHBROOK, IL 60062

Title: MGR () Delete
Name: VIOLA, MARCO
Address: 1200 EAST PUTNAM AVE
City-St-Zip: RIVERSIDE, CT 06878

Title: MGR () Delete
Name: LUCCHESI, PABLO
Address: 3235 NW 62ND ST
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES:

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

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

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: PABLO LUCCHESI

MGR

03/31/2009

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