

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000044229

FILED
Apr 07, 2009
Secretary of State

Entity Name: SON HERITAGE LLC

Current Principal Place of Business:

5240 NE 28TH AVE
FT. LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

5240 NE 28TH AVE
FT. LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIEDLING, CHARLES
5240 NE 28TH AVE.
FT. LAUDERDALE, FL 33308 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 () Delete
Name: DIEDLING, ANDREW
Address: 10922 KRISTIRIDGE DR.
City-St-Zip: CINCINNATI, OH 45252 US

Title: MGRM () Delete
Name: DIEDLING, CHARLES
Address: 5240 NE 28TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33308 US

Title: MGRM () Delete
Name: DIEDLING, LINUS
Address: 101 NW 21ST COURT
City-St-Zip: WILTON MANORS, FL 33311

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: ANDREW S. DIEDLING MGRM 04/07/2009

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