

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L08000050736

**FILED**  
**Jul 17, 2009**  
**Secretary of State****Entity Name:** ABYDOR, LLC**Current Principal Place of Business:**6909 SILVERMILL DR  
TAMPA, FL 33635 US**New Principal Place of Business:**11565 7TH LANE N.  
1602  
ST.PETERSBURG, FL 33716 US**Current Mailing Address:**6909 SILVERMILL DR  
TAMPA, FL 33635 US**New Mailing Address:**11565 7TH LANE N.  
1602  
ST.PETERSBURG, FL 33716 US**FEI Number:** 39-2076467**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**TOTHNE HECZEI, DORA  
6909 SILVERMILL DR  
TAMPA, FL 33635 US**Name and Address of New Registered Agent:**TOTHNE HECZEI, DORA  
11565 7TH LANE N.  
1602  
ST.PETERSBURG, FL 33716 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: SZABOLCS TOTH

07/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**Title: MGR ( ) Delete  
Name: TOTH, SZABOLCS  
Address: 6909 SILVERMILL DR  
City-St-Zip: TAMPA, FL 33635 US**ADDITIONS/CHANGES:**Title: MGR (X) Change ( ) Addition  
Name: TOTH, SZABOLCS  
Address: 11565 7TH LANE N.  
City-St-Zip: ST.PETERSBURG, FL 33716 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: SZABOLCS TOTH

MGR

07/17/2009

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