2007 LIMITED LIABILITY COMPANY

FILED Jan 22, 2007 08:00 AN Secretary of State

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Principal Place of Business 10945 WEST COLONIAL DRIVE

OCOEE, FL 34761

Mailing Address

10945 WEST COLONIAL DRIVE OCOEE, FL 34761

DO NOT WRITE IN THIS SPACE

01172007 No Chg-LLC CR2E083 (11/05)

Applied For 4. FEI Number 75-2988509 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

KRISAN, JEFF 10945 WEST COLONIAL DRIVE OCOEE, FL 34761

SIGNATURE:

BIGNATURE AND TYPED OR PRINTED

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered o	ifice or registered agent, or bo	h, in the State of Florid	da. I am familiar v	with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and site it applicable		(NOTE Registered Agent signature required when reinstating)		_ 	<u></u>		
	iling Fee is \$50.00 ue by May 1, 2007			<u>. </u>		<u> </u>	
9.	MANAGING MEMBERS/MANAGERS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KRISAN, JEFF 10945 W COLONIAL DR OCOEE, FL 34761	h					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U00000594289 01/22/07-80065-018 50.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WE	RITE		
TITLE NAME STREET ADDRESS CITY-\$T-ZIP			IN ⁻	THIS SPA	ACE		
TIPLE NAME STREET ADDRESS CRY-ST-ZIP					·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
11. I hereby of indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature s billity company or the receiver or trustee empowered to exe	qualify for the exemple that have the same hecute this report as re	otions contained in Chapter 119 egal effect as if made under or equired by Chapter 608, Florida	9, Florida Statutes. I fi ath; that I am a mana a Statutes.	arther certify that ging member or i	the information manager of the	

E OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE