

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000014444

Entity Name: SALLY SEZ, L.L.C.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

C/O SALLY L. BAUMGARTNER
3125 SE GOVIA ST
CORAL GABLES, FL 33134

New Principal Place of Business:

C/O SALLY L. BAUMGARTNER
3125 SEGOVIA ST
CORAL GABLES, FL 33134

Current Mailing Address:

C/O SALLY L. BAUMGARTNER
PO BOX 140383
CORAL GABLES, FL 33114

New Mailing Address:

FEI Number: 03-0460379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUMGARTNER, SALLY L MS.
3125 SEGOVIA ST.
CORAL GABLES, FL 33134 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: BAUMGARTNER, SALLY L MS
Address: 3125 SEGOVIA ST.
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR () Delete
Name: BAUMGARTNER, SALLY L MS.
Address: 3125 SEGOVIA STREET
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES:

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: SALLY L. BAUMGARTNER

MGR

01/14/2009

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