

FILED**May 01, 2008 08:00 AM**
Secretary of State**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L02000017869		
1. Entity Name ALL NATURE LLC		
Principal Place of Business 10773 NW 58th PMB281 MIAMI-FL-33178		Mailing Address 10773 NW 58th PMB281 MIAMI-FL-33178
DO NOT WRITE IN THIS SPACE		
4. FEI Number 56-2284390		Apply Fee Not Applicable
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required
04292008 No Chg-LLC CR2E093 (12/07)		
6. Name and Address of Current Registered Agent QUINTA, MARIO 5255 NW 165 ST MIAMI, FL 33014		DO NOT WRITE IN THIS SPACE
5. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent not filed if applicable. (NOT: Registered Agent signature required when restricted.) DATE _____		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VAZQUEZ, ALEJANDRO 5255 NW 165 ST MIAMI, FL 33014	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM QUINTA, MARIO 5255 NW 165 ST MIAMI, FL 33014	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date _____ Daytime Phone # _____		