

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Sep 08, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000028126

1. Entity Name
ROTHLYNN DESIGN, LLC



Principal Place of Business
975 NORTHWEST 31ST AVENUE
POMPANO BEACH, FL 33609

Mailing Address
975 NORTHWEST 31ST AVENUE
POMPANO BEACH, FL 33609



07072004No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3718418

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22ND STREET, 4TH FLOOR
MIAMI, FL 33145

**DO NOT WRITE
IN THIS SPACE**

8. 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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

Filing Fee is \$50.00
Due by September 8, 2004

000000171792
09/08/04-80006-002 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME JOHNSON, MARC
STREET ADDRESS 975 NORTHWEST 31ST AVENUE
CITY-ST- ZIP POMPANO BEACH, FL 33605

TITLE MGR
NAME JOHNSON, REBECCA
STREET ADDRESS 975 NORTHWEST 31ST AVENUE
CITY-ST- ZIP POMPANO BEACH, FL 33605

TITLE
NAME
STREET ADDRESS
CITY-ST- ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST- ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Rebecca Johnson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Aug 27 2004 954-917-9070