

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007268

Entity Name: AON 31ST LLC

FILED
Feb 18, 2008
Secretary of State

Current Principal Place of Business:

1812 SW 31ST AVE.
PEMBROKE PARK, FL 33009

New Principal Place of Business:

Current Mailing Address:

1812 SW 31ST AVE.
PEMBROKE PARK, FL 33009

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WICHMANN, ANGELA K
1812 SW 31ST AVENUE
PEMBROKE PARK, FL 33009 US

Name and Address of New Registered Agent:

KELSEY, ANGELA M
1812 SW 31ST AVENUE
PEMBROKE PARK, FL 33009 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: ANGELA M. KELSEY

02/18/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KELSEY, CHARLES M III
Address: 1812 SW 31ST AVE.
City-St-Zip: PEMBROKE PARK, FL 33009

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: KELSEY, CHARLES M JR
Address: 1812 SW 31 AVE
City-St-Zip: PEMBROKE PARK, FL 33009

Title: MGRM () Change (X) Addition
Name: KELSEY, ANGELA M
Address: 1812 SW 31 AVE
City-St-Zip: PEMBROKE PARK, FL 33009

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: ANGELA M KELSEY

MGRM

02/18/2008

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