

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012422

**FILED**  
**Jan 11, 2008**  
**Secretary of State**

**Entity Name:** ARTWELL'S PAINT & LANDSCAPING LLC.

**Current Principal Place of Business:**

6189 SW 194TH AVE  
PEMBROKE PINES, FL 33332

**New Principal Place of Business:**

**Current Mailing Address:**

6189 SW 194TH AVE  
PEMBROKE PINES, FL 33332

**New Mailing Address:**

FEI Number: 77-0600412      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DOVE, DEXTER  
6189 SW 194TH AVE  
PEMBROKE PINES, FL 33332      US

**Name and Address of New Registered Agent:**

ARTWELL, ANTHONY  
6189 SW 194TH AVE  
PEMBROKE PINES, FL 33332      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: ANTHONY ARTWELL

01/11/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: CEO ( ) Delete  
Name: DOVE, DEXTER  
Address: 6189 SW 194TH AVE  
City-St-Zip: PEMBROKE PINE, FL 33332

**ADDITIONS/CHANGES:**

Title: CEO (X) Change ( ) Addition  
Name: ARTWELL, ANTHONY  
Address: 6189 SW 194TH AVE  
City-St-Zip: PEMBROKE PINE, FL 33332

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: ANTHONY ARTWELL

CEO

01/11/2008

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