

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000033956

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** THE LAW FIRM OF SAM R. ASSINI, LLC

**Current Principal Place of Business:**

1490 NE PINE ISLAND ROAD  
4A  
CAPE CORAL, FL 33909

**New Principal Place of Business:**

**Current Mailing Address:**

1490 PINE ISLAND ROAD NE  
4A  
CAPE CORAL, FL 33909

**New Mailing Address:**

**FEI Number:** 20-0207821

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ASSINI, SAM R  
1490 PINE ISLAND ROAD NE  
4A  
CAPE CORAL, FL 33909 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: MGRM  
Name: ASSINI, SAM R MGRM  
Address: 1490 PINE ISLAND ROAD NE, SUITE 4A  
City-St-Zip: CAPE CORAL, FL 33909

I hereby 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: SAM R. ASSINI

MGRM

01/04/2012

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