2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037226

Entity Name: 213, LLC

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8612 DOLCE VITA LANE ODESSA, FL 33556

Current Mailing Address: New Mailing Address:

8612 DOLCE VITA LANE ODESSA, FL 33556

FEI Number: 20-0259961 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GRAY, KIMBERLY A GRAY, MELANIE E
8612 DOLCE VITA LANE
ODESSA, FL 33556 US GRAY, MELANIE E
8612 DOLCE VITA LANE
ODESSA, FL 33556 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: MELANIE E. GRAY 04/28/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: GRAY, KIMBERLY A Name: GRAY, MELANIE E

 Name:
 GRAY, KIMBERLY A
 Name:
 GRAY, MELANIE E

 Address:
 8612 DOLCE VITA LANE
 Address:
 8612 DOLCE VITA LANE

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:
 ODESSA, FL 33556

Title: MGR () Delete Title: () Change () Addition Name: GRAY, BRENDA J Name:

 Name:
 GRAY, BRENDA J
 Name:

 Address:
 8612 DOLCE VITA LANE
 Address:

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 GRAY, MELANIE E
 Name:
 FUGIT, VALERIE G

 Address:
 8612 DOLCE VITA LANE
 Address:
 8612 DOLCE VITA LANE

 City-St-Zip:
 ODESSA, FL 33556 US
 City-St-Zip:
 ODESSA, FL 33556

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: BRENDA J. GRAY MGR 04/28/2008