

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052529

Entity Name: DECKHANDS, LLC

FILED
Jan 11, 2008
Secretary of State

Current Principal Place of Business:

920 NW 8TH AVENUE
SUITE B
GAINESVILLE, FL 32601 US

Current Mailing Address:

PO BOX 2284
HAWTHORNE, FL 32640 US

New Principal Place of Business:

411 WALNUT ST
PMB 4338
GREEN COVE SPRINGS, FL 32043 US

New Mailing Address:

411 WALNUT ST
PMB 4338
GREEN COVE SPRINGS, FL 32043 US

FEI Number: 20-0472883

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, ROBYN
920 NW 8TH AVENUE
SUITE B
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

WILSON, ROBYN
411 WALNUT ST.
PMB 4338
GREEN COVE SPRINGS, FL 32043 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:

01/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WILSON, ROBYN
Address: 920 NW 8TH AVENUE
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WILSON, ROBYN
Address: 411 WALNUT ST. PMB 4338
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: ROBYN WILSON

MGRM

01/11/2008

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